

THE RURAL DISTRICT OF ALTON

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

CHIEF PUBLIC HEALTH INSPECTOR

for the year

1963



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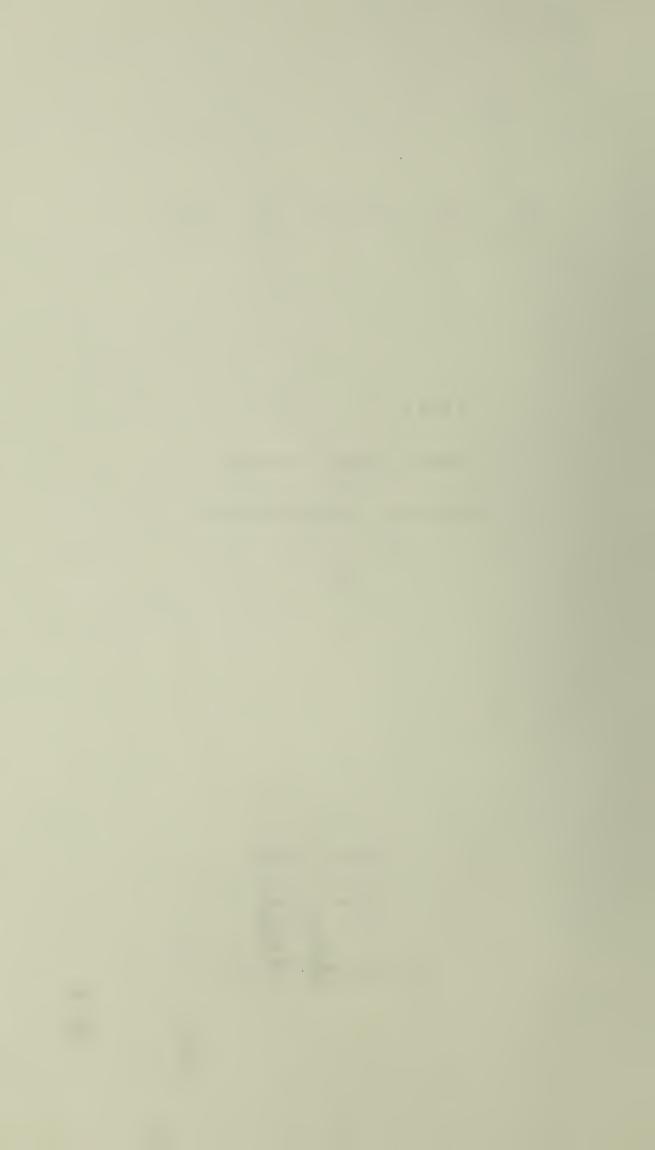
1963

Council Offices,
Barton End,
Lenten Street,
Alton, Hants.

(Telephone: - ALTON 2263)

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THE RURAL DISTRICT COUNCIL OF ALTON

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Vice-Chairman ... Cmdr. L. Derek Jones, R.N. (Retd)

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Chairman of Sub-Committee ... Mrs. C. P. Thomson-Glover

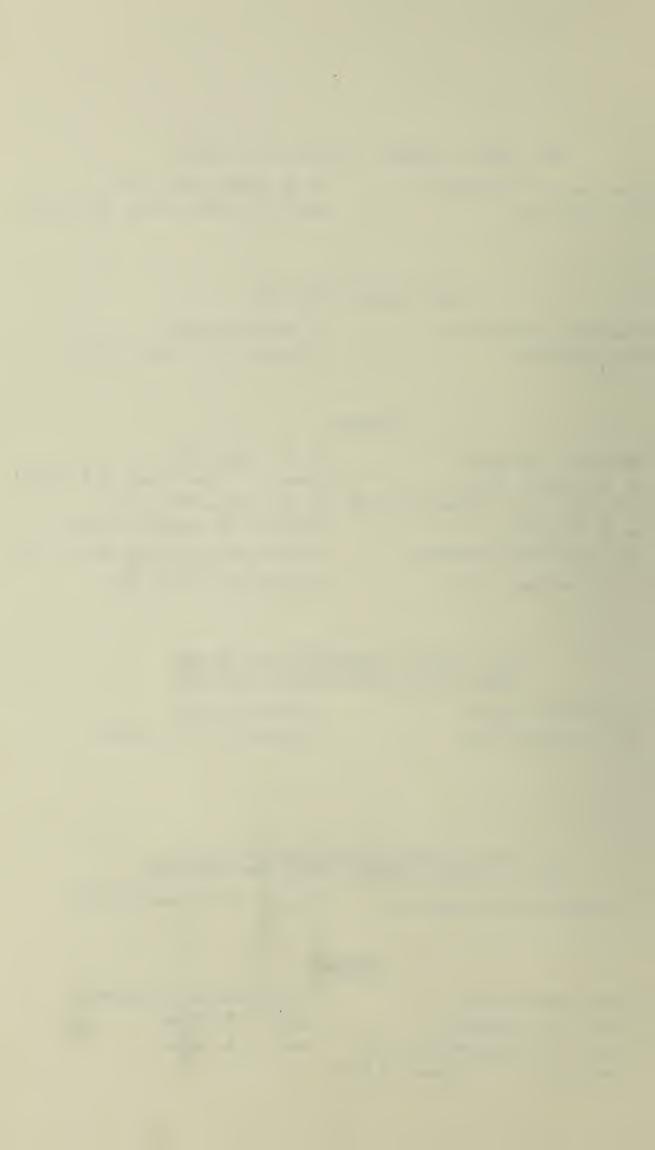
MEMBERS

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Mrs. H. M. Cumberbatch, J.P. Mrs. N. S. Ryder

Hon. Mrs. V. L. Gilmour, O. B. E.



PUBLIC HEALTH DEPARTMENT STAFF

Medical Officer of Health - R. L. Goodey,
B. A., M. R. C. S., L. R. C. P., D. P. H.

Chief Public Health Inspector and Petroleum Officer

- J. H. Johnson, C.R.S.I., M.A.P.H.I.

Additional Public Health Inspector

- W. R. Ayrton,
M. A. P. H. I.
(Resigned: - 30.4.63)

- B. J. Dean, M. A. P. H. I. (Appointed: - 8.7.63)

Clerks

- P. F. Mercer

- Mrs. V. Cox (Appointed: - 1.10.63)

Rodent Officer

- J. W. Debenham

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INDEX

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

PART I - General Report of the Medical Officer of Health (Pages 1-29)

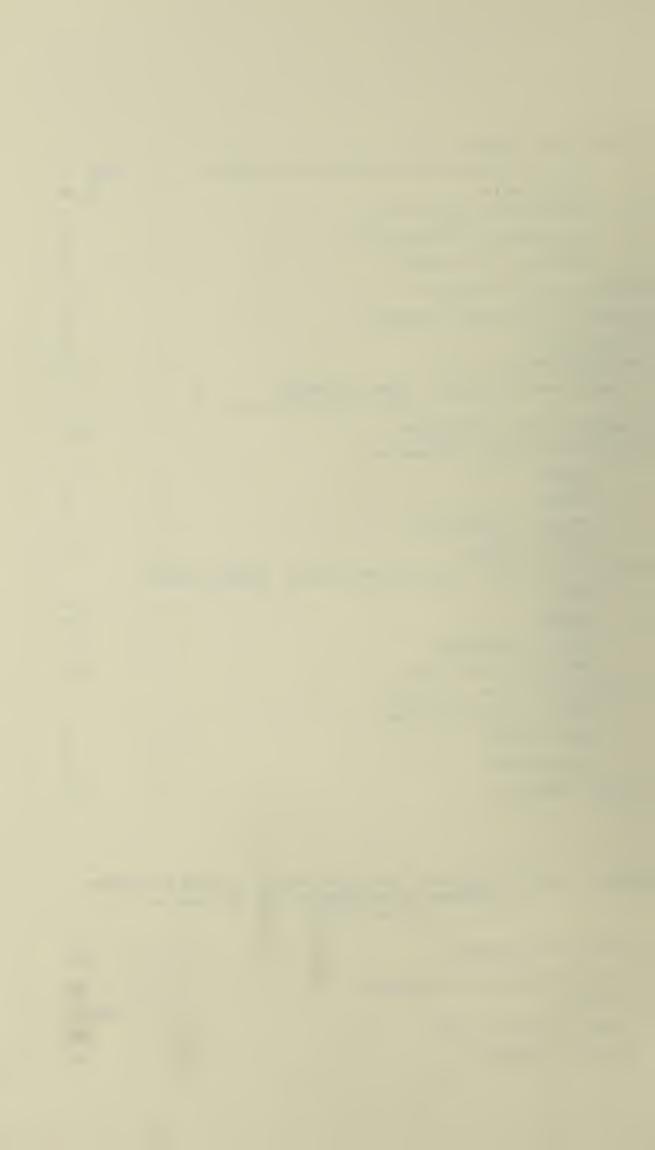
introductory wester	• • •	Page 1
Accidents	• • •	13
Alton Ru al District - General description	• • •	2
Alton Rural District - Statistics of area		2
Ambulance facilities	• • •	15
Ante-natal clinics	• • •	22
Area Welfare Services		23
Caravans as permanent housing	• • •	12
Child Welfare Centres	• • •	16
Common Lodging Houses	• • •	13
Deaths - Analysis of Causes	۰ • •	27
Deaths - Sex and Age Distribution	• • •	28
District Health Sub-Committee - List of Members		15
Factories Acts		1.3
General Health Services of area - Provision of		15
Health Education		13-14
Health Visiting		19
Home Help Service	0 • •	21
Housing	0 6 0	11
Infectious Diseases - Prevalence of	• • •	29
Infectious & Other Diseases - Commentary (Pages	56)	
Food Poisoning	• • •	6
Leptospirosis	• • •	6
Measles	0 0 0	5
Puerperal Pyrexia	• • •	5
Pulmonary Tuberculosis		5
Scarlet Fever	• • •	6
Somé Dysentery	• • •	6
Micoping Cough		5
Winter Epidemic Vomiting	3 • •	6
Laboratory facilities	o • •	21
Meals on Wheels Scheme		10
Midwifers and Home Nursing Services	• • •	20-21
National Assistance Act, 1948.		10
National Welfare Foods - Distribution Centres		17-18



Prophylaxis (Pages 7-10)		
B. C. G. Vaccination against Tuberculosis	• • •	Page 9
Brucellosis	• • •	9-10
Diphtheria Immunisation	8 D 0	7
Poliomyelitis Vaccination	0 0 0	8
Smallpor Vaccination	e	8
School Health Services	4 4 6	22
Sewerag and Sewage Disposal	• • •	12
Staff Notes		2
Swimmung Baths	* " *	13
Puberculosis Services Chest Clinics Mass X-Ray Services	}	22
Venereal Disease Services		23
Vital Statistics - Commentary		
Births	• • •	2,
Deaths	• • •	14
Deaths - Causes of	9 ♦ ♦	5
Infant Deaths	* • u	Lį.
Vital Statistics - Statistical Tables (Pages	24-26)	•
Births	• • •	24
Deaths	• • •	25
Infant Mortality	• • •	26
Nec-natal Mortality	• • •	26
Vital Statistics - Summary		
Infant Mortality Rates		3
Live Births		3
Stillbirths		3
Water Supplies	0 # 0	12
RT II - Arnual Report of the Chief Public Hea - Sanitary Circumstances of the (Pages 30-54)	lth Insp Area -	pector
Introductory Letter	• • •	30
Building Byelaws and Planning	0 0 0	52
Caravans		40-42
Common Lodging Houses		30

34

Domesti: Drainage



Factories		Pages 50-52
Food - Inspection and Supervision		35
Food Hygiene Regulations		36
Food Sampling		39-40
Hop-pickers' accommodation		39
Housing Acts		42-43
Ice Crean	0 u •	36
Improvement Grants for Housing (Pages 141-49)		
Discretionary Grants	• • • •	44-47
Standard Grants		47-49
1.11k		36
Noise Abatement Act, 1960.		38
Pet Animals Act, 1951.		39
Petroleum Acts	• • •	42
Public Cleansing		
Cesspool emptying		54.
Depots		54
Nightsoil collection	• • • •	<i>5</i> 4
Public conveniences		54.
Refuse collection		53
Public Works		
Local Authority Housing		53
Sewerage		53
Rent Act, 1957.		2:11
Rodent Control	• • •	3738
Sewerage		33-34
Swimming Pools		33
Water Supply		31-33





ALTON RURAL DISTRICT COUNCIL

Telephone Number: -- ALTON 2263

Barton End, Lenten Street, Alton, Hants.

To: - The Chairman and Members of the Alton Rural District Council.

Mr. Chaiman, Ladies and Gentlemen,

I beg to present the Annual Report for the year ending the 31st December, 1963. It is prepared according to the regulations laid down by the Ministry and deals with the sanitary circumstances, sanitary administration and vital statistics of the area, together with other matters considered of interest or concern to the health of the community in the area.

Each year some attempt is made to emphasise the importance of altering standards in assessing the development of public health. Public health organisation is subject to change; it is susceptible to modernisation only if the community is well informed and is prepared to jettisch ideas which were possibly suitable for the social climate and environment of thirty years ago but which now are out of date. Such ideas still find support in many quarters however.

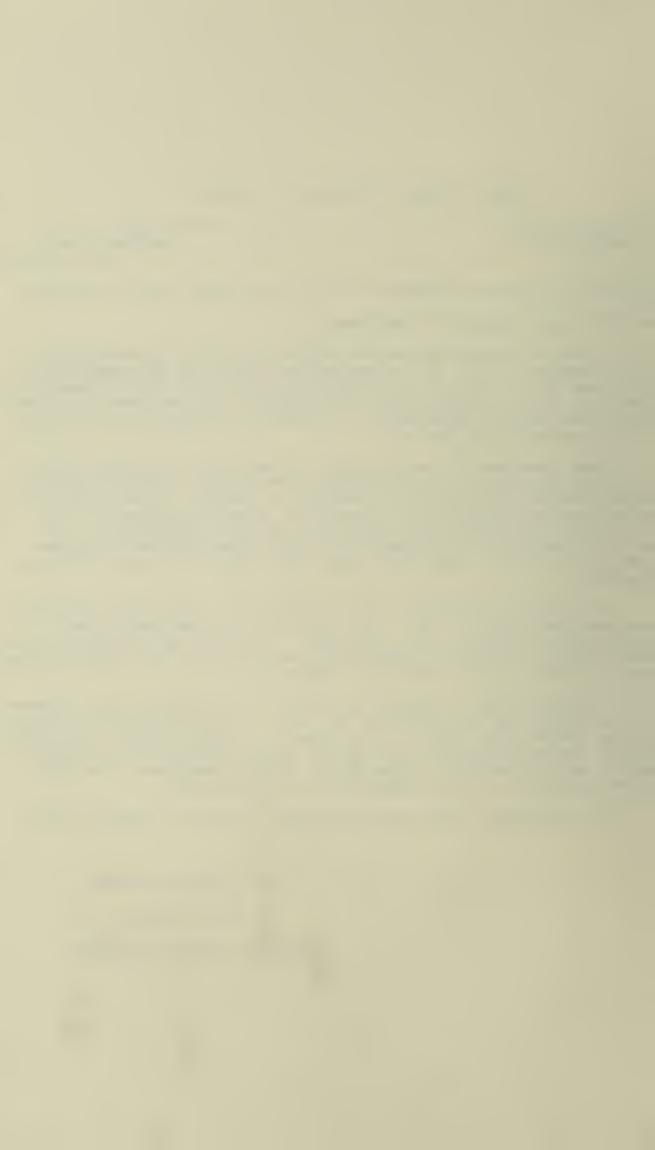
In general the health of the population of the Rural District has remained good in 1963. The figures for immunisation and vaccination, however, have decreased. Shortage of health visiting staff during the year is undoubtedly one cause of this indifference among parents which, I hope, is temporary.

I should like to express my thanks to the Chairman and Members of the Public Health Committee for their encouragement and support; to Mr. Holden, the Clerk of the Council; to Mr. Johnson, the Chief Public Health Inspector; and to all other officers of the Council and to all the members of the Public Health Department staff who have assisted me in the compilation of this report.

Mr. Chairman, Ladies and Gentlemen, I have the honour to be,

Your obedient servant,

MEDICAL OFFICER OF HEALTH.



PART I

GUERAL REPORT OF THE UDICAL OFFICER OF HEALTH

ALTON RURAL DISTRICT

This area extends from the Surrey border in the east to Winchester Rural District in the west. In the south it is bounded by Petersfield District and on the north by Basingstoke Rural District; it surrounces alton Urban District.

There are twenty-one parishes, much of the population is concerned with forming and associated occupations although in some parishes builting activity has resulted in a conciderable influx of retired parish and people whose livelihood is interestingly outside the circumstance are two military camps in the parish of its form. The projected classing of the Alton to Vinchester in the line may affect considerably toose parishes west of the town of litery population in this area was, therefore, remain static in the observe of additional transport facilities.

The ropul tion for Alton Eural District for mid-1963 is estimated at 25,360. This is an increase of 470 on 1962.

STAFF

Mr. W. A. Ayrton. Additional Public Health Inspector since the 4th June. 1962, resigned on the 30th April, 1963.

He was succeeded by Mr. B. J. Dean who commenced his duties on the 8th July, 1963.

Mr. B. F. Gorton, appointed as additional clerk for joint assistant in the Treasurer's and Public Health Departments, was transferred to the Treasurer's Department to work there in a full-time capacity as from the 1st October, 1963.

His part-time clerical duties in the Public Health Department are now undertaken by Mrs. V. Cox who was appointed to succeed him on the 1st October, 1963.

STATISTICS OF THE AREA As at 31st December, 1963.

Ares, in acres		65,526
Total estimated mid-year dome Population (including military)		25,560
Number of inhabited houses	• •	7,449
Ratinole Value	• •	£788,908
Product of the penny rate 1962-63		£1,233
Revised estimated product of penny rate 1963-64	0 0	£3,150

VITAL STATISTICS

LIVE BIRTHS

Number: - 569 (Male - 294 Female - 275)

Rate per 1,000 population:- 22.2

Illegitimate Live Births per cent of total live births: - 8.6

STILLBIRTHS

Number:- 10

Rate per 1,000 total live and still births:- 17.2

Total Live and Still Births:- 579

INFANT MORTALITY RATES

Infant Deaths (Deaths under 1 year) - 20

Total infant deaths per 1,000 total live births - 35.1

Legitimate infant deaths per 1,000 legitimate live births - 34.6

Illegitimate infant deaths per 1,000 illegitimate live births - 40.8

Neo-natal Mortality Rate -

Deaths under 4 weeks per 1,000 total live births - 19.3

Early Neo-natal Mortality Rate -

Deaths under 1 week per 1,000 total live births - 15.7

Perinatal Mortality Rate -

Stillbirths and deaths under 1 week combined per 1,000

total live and still births - 34.5

Maternal Mortality (including abortion)

Number of deaths - NIL

Rate per 1,000 total live and still births - NIL

NOTES ON VITAL STATISTICS

Where small numbers are involved the rates obtained are not necessarily statistically significant.

BIRTHS

Of the total of 569 live births, 49 were illegitimate.

The live birth rate calculated from these figures is 22.2. This may be compared with the rates for the previous quinquennium of 23.7 in 1962, 18.3 in 1961, 18.7 in 196), 17.6 in 1959 and 17.3 in 1958.

For this district a Comparability Factor is provided by the Registrar General in order that the birth rate in this area should be comparable with that in other areas.

As the Comparability Factor for births is 1.08, the adjusted rate is, therefore, 23.9.

The Birth Rate (provisional) for England and Wales in 1963 was 18.2 per 1,000 population (the highest since 1947).

DEATHS

Infant Deaths

Deaths under 1 year of infants in the area were 20 (18 legitimate and 2 illegitimate). Of these, 9 (8 legitimate and 1 illegitimate) died in the first week of life.

The Infant Mortality Rate for England and Wales in 1963 was 20.9 per 1,000 live births.

I'ct ! Deaths

There were 294 deaths in this area in 1963 (169 males and 125 males). This gives a crude death rate of 11.5 per 1,000 population.

giving an adjusted rate of 11.5.

The crude death rate for England and Wales in 1963 was 12.2 per 1,000 population.

CAUSES OF DEATH

There were 294 deaths in the Rural area in 1963. As has now become the usual pattern the most common single cause of death was "diseases of the heart and arteries". This was 107 or 36% of the total number. Accidents were the cause of 13 and suicide of 1 death. Respiratory diseases, including lung cancer accounted for 52 deaths.

A false impression appears to be current that the average age of death has increased markedly in the last thirty years. The average man aged 45 now may expect to live until 72; the average woman of 45 until 77. By the time these "average people" reach 65 the life expectation for the survivors is 12 years for the man and 15 for the woman. Compared with 1930-1932 this is only one extra year's life expectation for the man and two for the woman.

INFECTIOUS DISEASES

Communicable diseases for which statistics are available are those which are notifiable under various Acts and Regulations.

Notifications are made to this Department by general practitioners and through other sources. There is little question but that a proportion of cases is not notified, in particular, the infectious diseases of childhood (indeed, owing to prophylactic immunisation it is probable that many mild cases of whooping cough may pass unrecognised). Notification of tuberculosis is probably emplete.

MEASLES

This is the most common notifiable infectious disease. The incidence of measles varies, reaching a peak every second year; 1963 was such a year. In 1961 there were 298 cases notified in this area, 31 cases in 1962, and 290 cases in 1963.

WHOOPING COUGH

The protective value of immunisation against whooping cough is well proven. There were 11 cases notified in 1963. Forty years ago in this area according to the Annual Report of my predecessor, Dr. Leslie, there were several outbreaks of whooping cough necessitating the closure of schools. There was one death ascribed to whooping cough in 1923.

PUERPERAL PYREXIA

This is a "febrile condit on" associated with childbirth which requires investigation into the cause. The infection itself can be controlled by antibicties. There was one case reported in 1963.

PULMONARY TUBERCULOSIS

Thirteen cases of pulmonary taberculosis were notified during the year. A Tuberculosis Register is kept; at the end of 1963 the numbers on this Register (which includes all "arrested" and "quiescent" cases) were as follows:-

	Males	Females
Pulmonary Tuberculesis	34	67
Non-pulmonary Tuberculosis	19	21

The results of the 1962 visit of the Mass Miniature Radiography Unit became available during the year.

These are summarised as follows: --

Number of X-rays taken	• • •	1,196
Cases of pulmonary tuberculosis	• • •	2
Cases of non-tuberculous lesions		
(including lung cancer)	• 0 •	10

WINTER EPIDEMIC VOMITING

In November an outbreak of diarrhoea and vomiting was reported in a local school. Over half the children was affected but symptoms were mild, latting for twenty-four hours and leaving no after-effects.

Bacteriological examination of food samples from the school kitchen and other investigations involving school children and food handlers were negative. It is probable that this outbreak was due to "winter epidemic vomiting" of viral origin. A similar outbreak was noted in a local school in March, 1962.

SONNÉ DYSENTERY

This infection of the bowel is easily passed from one person to another in a family or in a school. Unfortunately temporary carriers of this disease are not always detected. One infection with Sonné dysentery was confirmed bacteriologically. A certain number of other cases were investigated but the organism was not isolated by the laboratory.

FOOD POISONING

No cases of food poisoning were reported. However, during the year this Department was informed of three different episodes of food poisoning occurring outside the district following meals at which people living in this area had been present. Further investigation proved that these persons were not directly involved.

SCARLET FEVER

There were four cases of scarlet fever reported during the year. The streptococcus responsible for scarlet fever also causes other non-notifiable disease. The notification of these four cases has little relevance when considering incidence as there is widespread a stribution of the causative organism.

LEPTOSPIROSTS

This is a disease which is typically associated with rats. One case occurred in this area in a rat infested kennels, the germ responsible almost certainly causing infection through lacerations on the patient's hand. The case was confirmed pathologically, the patient, although extremely ill, recovered. The rat infestation was cleared by this Department.

00--00

Infectious disease has lost much of its importance in the community in the 1960s. With a rising standard of living and better hygienic methods the incidence of transmissible disease (with the exception of intestinal infections) has been very much reduced. Emphasis is now required on further methods of prevention to maintain this immunity.

PROPHYLAXIS

DIPHTHERIA

It is always difficult to appreciate the value of preventive measures, few people give much attention to diseases they have not had. Statistics concerning the community lack the appeal of the more dramatic episodes in an individual's history. However, the following simple figures are informative and show the decrease in diphtheria following the acceptance of immunisation procedures:-

Mean Annual Death Rate per million - England and Walls -

1940-44	1953	1962
4.8	4	0,2

In this area the role of the Health Visitor most important in maintaining a high level of infant immunisatio. Generally it is considered that an adequate degree of protection in the community is secured by a minimal immunisation level of 70% of infants. In this area during much of 1963, owing to it, health and absence, the normal complement of Health Visitors was not available. The percentage of infants immunised against diphtheria in Arton Rural District in 1963 was 60%.

The number of injections given in the year 1963 is so wn below:-

Number of children who completed a course of primary immunisations and who received reinforcing injections										
Ages	- API	theria Ly	& Who	heria oping igh	Con	oping Lgh Lly	Trip Anti		Diphtl & Tet	,
	Prim	Bstr	Prim	Bstr	Proim	Bstr	Prim	Bstr	Prim	Bstr
Under 1	2	Corato	Contract of the contract of th	Carry	, eco	deate	138	The state of the s	Arce a	-
1 - 4	25	53	6	دئه	ile.	e:	253	4 - 7		1
5 - 14	11	267	\$3	Ban-majo majorin . Bija dilamon.	B DO NO TO ACCOUNT.	(PEC-dana Cora-ellipro-da Talipubliko mi decella	5	62	3	95
Totals:	38	267	and the same of th	The same or the contract of the same of th	2	d 3 Nr in all film at i	396	73	4	96

During the year 1963, therefore, 445 primary courses against diphtheria were provided for children under 4 and 437 booster doses were given in that age range.

In the first twelve months of life, 142 dillaren completed a primary course.

POLIOMYELITIS

In 1963 there were in England and Wales 51 notifications of acute poliomyclitis. Five years previously there were approximately 2,000 and in 1953 over 5,000 such notifications. The decrease has been due to a considerable extent to the introduction of vaccination against poliomyclitis. In 1961 there was a rise in notifications, Sabin live oral vaccine was then introduced (and has now largely replaced Salk vaccine). The rapid decline in notified cases thereupon continued.

There have been no cases of poliomyelitis notified in this area since 1959.

It is advocated that all infants who have reached the age of six months should start receiving protection with vaccine and should receive a boosting dose at the age of 5. Such vaccine is carried out in the local authority clinics and primary schools, and is also available from general practitioners. Oral vaccine is almost exclusively used, this having largely superseded Salk vaccine which is given by injection. The advantages of oral vaccine over Salk in ease of vaccination and in duration of protection are now well known. In 1963, 295 primary vaccinations against poliomyelitis were cappled out. Expressed as a percentage of births in 1962, (595), the approximate figure of 50% for infant vaccination against poliomyelitis is obtained. This cannot be considered satisfactory. It is hoped that 196h will show a return to the previously adequate level of protection.

VACCINATION AGAINST SMALLPOX

Opinions differ as to the desirability of universal infant vaccination against smallpox (universal vaccination of adults is unnecessary and impossible). The usual practice in case of an outbreak is ring vaccination of contacts rather than mass vaccination of the population.

Many persons wishing to go abroad require an International Certificate of Vaccination, so vaccination for such people is necessary. Less complication occurs if primary vaccination in children is carried out after the first birthday. The Ministry of Health, therefore, suggested in 1962 that vaccination against smallpox is best performed after the first twelve months and this is done in local authority clinics. The results of this policy will be seen in the figures for vaccination in 1963. Owing to postponement of vaccination until the second year of life of many children, it is not possible to obtain figures comparable with previous years.

An analysis of vaccinations carried out in this area during 1963

All Ages

	Primary Vaccinations	Re- Veccinations	
ist Quarter	19	A 57	The number of
2nd Quar er	15	18	children under 2 years of age
3rd Quarter	37	17	vaccinated in the
4th Quarter	56	26	Rural District in 1963 was 106
	127	Constitution 100	- Guarantee

B. C. G. VACCINATION AGAINST TUBERCULOSIS

The main reasons for the great decrease in cases of tuberculosis are undoubtedly the rising standards of living and better houses, pasteurisation of milk or attestation of herds, the activities of the Chest Clinics and the efficacy of the new drugs used by Chest Physicians and the investigation of contacts. B.C.G. vaccination only occupies a very minor position. B.C.G. is available through the Chest Physicians as necessary, or through the local health authority for all children at the age of thirteen. Vaccination is given in school to all children whose parents have given consent and whose reaction to a skin test is negative. Some protection is, therefore, available for children at an age when there is increasing risk.

Figures below concern children living in the area receiving B.C.G. vaccination at local schools:-

At the first school - 167 out of 179 pupils received B.C.G. vaccination.

At the second school - 18 out of 19 pupils received B.C.G. vaccination.

This shows that approximately 8% of children at age 13 attending schools in this area are tuberculin positive.

BRUCELLOSIS

This is a disease causing contagious abortion in cattle and undulant fever in man. The incidence of undulant fever in man is not accurately known as symptoms are variable, duration may be long and diagnosis difficult. One method of transmission is through raw milk. All milk sold in England comes from Tuberculin Tested herds; unfortunately it is not compulsory to pasteurise milk. Raw milk can transmit organisms causing dysentery, diphtheria, sore throat, paratyphoid and brucellosis. It can, although it very rarely does. Pasteurisation does away with even this slight risk. It would seem reasonable that all milk sold should, therefore, be made undisputably safe, that is, pasteurised. Some people prefer raw milk and are prepared to pay a higher price for it. My colleague, Dr. Chalmers Parry, the Medical Officer of Health for Petersfield, has drawn attention to this "Alice in Wonderland" position where the consumer pays higher for milk which cannot be guaranteed free from germs than for milk which can be guaranteed safe. Those who drunk most milk, children, are those who should be most protected.

During the year a report was received on milk produced at one farm in this area where Brucella abortus was found on culture of a milk sample. Luckily all milk produced on this farm was pasteurised at the dairy; there was, therefore, no danger to the public. It was arranged that all milk retained on the farm for use was boiled.

Further investigation of this matter was taken over by the Animal Health Services Department.

Vaccination of cattle against brucellosis is carried out and occasionally with certain tests a false positive can be obtained for brucellosis. This may take place if vaccination is delayed and further time-consuming tests need to be carried out to exclude the possibility of infected milk. This occurred when samples were taken of raw milk originating from a producer in the area.

The Ministry of Agriculture has informed the County Councils Association that "vaccination will reduce the clinical symptoms of the disease in the cow but the animal can still secrete the causative organisms and excrete them in the milk". Vaccination as a calf does not render milk necessarily safe when the cow later lactates. I can only agree with the Medical Officer of Health and Chief Public Health Inspector of Petersfield, our neighbouring district, when in a joint letter (Municipal Engineer of 24th January, 1964) they ask "How can such milk be safe?" As Dr. Chalmers Parry has mentioned elsewhere "Universal pasteurisation would not eradicate brucellosis but it would at least eliminate milk borne human infection from the non-farming community and special attention could then be focussed on the animal handlers and the vulnerable workers concerned".

In England and Wales it was estimated in 1963 that there are 500 to 1,000 cases yearly of this disease in humans. Until brucellosis in cattle has been eradicated (as is very nearly the case in some Scandinavian countries) pasteurisation of all milk should be carried out.

NATIONAL ASSISTANCE ACT, 1948 (Section 47)

It was found necessary in 1963 to apply to the Court for compulsory powers of removal of two old ladies, sisters, living in squalor, not having anyone adequately to look after them and unable to care for themselves. Such cases occur very infrequently; it is the only case arising during the last five years in this district. Usually with community help, tact by the welfare authority and neighbourly forbearance much can be done to keep old persons in the community. However, it is pleasing to be able to mention that these two sisters, now very much better in health and nutrition, are living happily together in an Old Persons' Home.

MEALS ON WHEELS SERVICE

During 1963 a Meals on Wheels Service for old persons who needed help was instituted in the western parishes in this area. It was run by the Women's Voluntary Service, the costs being met equally by the Rural District Council and by the County Council. Plans have already been made to extend this service over the whole district in 1964 although there are many difficulties inherent in running such a service in a sparsely populated rural area. It is considered that one of the main objects of this service is to make certain that old people living alone, possibly in very isolated houses, are visited once or twice weekly. In this way loneliness is relieved and help in other ways can be given. A reasonable sum (1/6d.) is charged for each hot meal; this is considered a fair price by the recipients but in case of need it can, of course, be reduced.

This service is intended to cater for the housebound, the aged and infirm; it could not be carried out if all elderly persons whatever their circumstances were equally eligible. All applications are first endorsed by the Area Welfare Officer.

HOUSING

Housing for the elderly in the area presents many problems. In isolated villages one difficulty is that demand is intermittent and small; a need which is pressing when a plan is made to provide such houses in a particular village may have disappeared through death before the houses to fulfil that need are built. It is true that old persons are most reluctant to move from their old houses to more suital accommodation but it would appear that the only practical scheme is to arrange flats or bungalows in an ordinary central housing estate near shops. It seems most unfortunate that the joint housing project considered in conjunction with Alton Urban District Council has not materialised and it is to be hoped that in due course agreement can be reached. Isolation of a collection of elderly people in the community is almost as much to be avoided as isolation of an individual old person. Preferably old persons' flats or bungalows should be integrated into an ordinary housing estate. Seclusion is unnecessary, depressing and defeats its own object, namely maintenance in the community. According to the Registrar General's estimate in 1961 there were 2,965 persons over 65 living in this area. More old persons' accommodation is needed.

The Housing Manager, Mr. E. C. A. Shuttleworth, has provided the following details concerning housing applications. Names on the list in 1961 were 241, in 1962, 240, and in 1963, 219.

HOUSING APPLICATIONS - 1963

Revision forms sent out 311
Revision forms received 219

PARISH	FORMS RECEIVEI							
	KEODI VEI	S	R	Relat -ives	Rooms	Cara- vans	Army Qrs.	Trav -ell -ers
Bentley Bentworth Binsted Chawton East Tisted Farringdon Four Marks Froyle Grayshott Headley Kingsley Lasham Medstead Newton Valence Ropley Selborne	14 1 4 1 4 1 2 1 2 1 1 1 1 4 1 4 1 5 1 1 1 1 1 1 1 1 1 1 1	6 11138267 11112	813 111671 3133	3 1 4	2	1	1	-2
Shalden West Tisted Whitehill Wield Worldham	1 - 113 1 -	9	51	17	7	22 1	7	6
TOTALS:-	219	50	100	26	9	26	8	8

NOTES: S indicates Service Tenancy
R indicates Rented Tenancy
Figures for Travellers not included in column
headed "Forms Received"

CARAVANS AS PERMANENT HOUS AND

Frequently the attention of the Pullic Health Department is requested when a caravan is considered usual table by its occupants. Nearly all caravans in the area, apart from those associated with a house and kept in its curtilage, are grouped on licensed sites, the owners of which are held responsible for the maintenance of hygiene and sanitation. On some of these sites there is still room for improvement. Many caravans are very poorly insulated; in cold weather such as in early 1963, the water various produced by paraffin heaters and by the occupants themselves of the weather all tincons are shut, there is little ventilation and the condensation man, when over bedding and clothes. The more overcrowded and various can be unhealthy when ventilation is poor. Early 1961 to different for house dwellers, but for people with young children living permanently in caravans conditions were frequently unhealthy and always very difficult.

WATER SUPPLIES

Mains water is supplied by the West Valley Water Company and the Mid-Wessex Water Company. Many isolated houses related on rain water tanks or their own wells for a value supply although gradually extensions are being made to the mains.

Routine reports were received constanting water samples taken from the companies' wells and main water supplies. All were satisfactory. The amount of fluoride in water supplied to this district is a "trace". It is to be recorded with actisfaction that this Council agreed to support Hampshire County Council in its proposal to add fluoride to the mains water supplies in the County. It is recorded with regret that this proposal is not yet being implemented.

Further information concerning the adequacy and quality of the water supply will be found in the Chief Public Health Inspector's part of this report.

SEWERAGE AND SEWAGE DISPOSAL

A public enquiry was held by the Ministry of Housing and Local Government into matters connected with providing sewerage for the village of Selborne. The difficulty Lay is securing a site for the sewage plant which would not interfers with the natural amenities of the village. A site has now been the sen which it is hoped will meet with the Minister's approval, the present of those interested in the preservation of rural England, and not least the desires of those villagers who still use a bucket as a convenience. The water carriage system was invented in the reign of Milabeth I; Selborne and other parishes have waited (and are still waiting) over 360 years for this amenity.

Plans for the construction and extended of sewers in Bentley and Froyle and other parishes are in hand. Fuller information is available in the Chief Public Health Inspectable section of this report.

SWIMMING BATHS

Two swimming baths with restricted entry are available, one at a school in Grayshott (all samples taken from this bath in 1963 were bacteriologically satisfactory) and one at Bordon Military Camp.

There are no public swimming baths.

COMMON LODGING HOUSES

There are none in this area.

FACTORIES ACTS

Information concerning factories will be found in the Chief Public Health Inspector's section of this report.

ACCIDENTS

Since 1959 Mr. D. F. Aiano, the Secretary of Alton General Hospital, has kindly provided statistics of patients from the Rural area, victims of accidents in the home, who have attended the outpatients' department. Each year the figures have emphasized the same facts, the number of children under 4 who have been typed or scalded or who have swallowed drugs or tablets, and the number of the old who have had serious falls. This year it has not seemed necessary to repeat this investigation. From national figures 25% of all deaths in childhood are due to accidents, and accidents cause more deaths than any other single disease in the under 15 age group. Poor supervision and carelessness on the part of adults is one of the main reasons for this. It is to be hoped that the attention of the public has now been drawn to the danger of inflammable clothing but the unguarded fire is just as much to blame. Extensive scalds due to children upsetting boiling water or fat or due to pulling at an unnecessary tablecloth are more common. Every publicity in this district is given to measures to reduce the number of such accidents. Lectures are given, mothers are constantly reminded by health visitors and in clinics, and posters emphasise care in the home.

HEALTH EDUCATION

It has been stated that Health Education is "social philosophy in action". Unfortunately a lack of a sense of reality may often be obscured by a smoke screen of words. Health Education in essence is the persuasion of the community to adopt practices resulting in less disease. There is little doubt that Health Education is one of the most important functions of a Health Department; it is specialised and it requires a team. Thus education of those concerned in the handling, preparation, cooking and storage of food needs knowledge of the job as well as knowledge of the person. This is clearly the province of the Public Health Department. Education of the individual school leaver and of the adult in general matters concerning health can similarly be carried out through staff of this Department.

I have to thank Mr. J. H. Johnson, he Chief Public Health inspector, for talks on prevention of disease given to school leavers and to clubs during the year.

Efforts were made throughout the year to further the campaign gainst smoking. Apart from the issue of posters to Youth Clubs and the display of a striking selection on parish notice boards, a sobile unit from the Central Council of Health Education gave a film show and talk at a secondary school which many children from the Rural district attend. In England and Wales 60% of boys between 16 and 18 moke regularly. It was found that when a lecture was given by a fealth Visitor in this secondary school to 150 children aged 13-14, approximately 90% had already commenced smoking. It is of interest that Section 7 of the Children and Young Persons' Act, 1933, made to an offence to sell tobacco to children apparently under 16. The lines have lately been increased. Not all digarettes smoked by hildren are obtained from parents or influence; many are regularly ought. This law can rarely be enforced.

As a follow-up to this campaign a request was received at the end of the year to provide a suitable anti-sacking film for a Youth club. This is pleasing in that although reveral films have been shown in the past to schools and clubs by this repartment, this was the first time that a spontaneous approach had been made by an outside rganisation for assistance. All previous film shows and talks were ade after a preliminary approach by this Department.

Quan.

This Rural District is now rapidly changing with increasing wilding. From the days when Henry Chaucer, the eldest son of the cet, was Warden of Woolmer Forest, to 1963 and the scrubland and eath of modern Bordon has taken over five centuries. With the rojected new town at Bordon part of the Rural District will change fore in the next twenty years than in the previous five hundred. Education will still remain the basis of community health although emphasis will be altered.

PROVISION OF GENERAL HEALTH SERVICES OF THE AREA

Since 1954 there has been in the County a scheme of devolution to District Health Sub-Committees of certain functions of the National Health Service Act, 1946.

Meetings of the 7 (Alton) District Health Sub-Committee are held quarterly at the Rural District Council Offices in Alton.

Membership of the District Health Sub-Committee is as follows:-

Chairman of Sub-Committee ... Mrs. C. P. Thomson-Glover.

Vice-Chairman Mrs. C. Harckham.

MEMBERS

- Alton Rural District Council Representatives -

Lady Bonham-Carter

The Viscountess Hampden

Mrs. E. J. Champney

Miss D. H. Paton

Mrs. H. M. Cumberbatch, J.P.

Mrs. N. S. Ryder

Hon. Mrs. V. L. Gilmour, O.B.E. Mrs. C. P. Thomson-Glover

- Alton Urban District Council Representatives -

Mrs. M. M. Brockes

Mrs. C. Harckham

- Nursing Association Representatives -

Mrs. G. Coke (Bentley)

Mrs. I. M. Durham (Grayshott)

- British Medical Association Alan F. Goode, Esq., F.R.C.S.
 - County Councillor W. H. Crispe, Esq.
- South-East Hants Area Nursing Officer -

Miss M. B. Busby

AMBULANCE FACILITIES

The Ambulance Service is conducted by Hampshire County Council who supply monthly details of journeys to the Public Health Committee. The ambulances for the area are stationed at Alton.

Application for the use of ambulances should be made to the Central Ambulance Control in Winchester (Telephone Number: - Winchester 2536 or 2748) at the following times: -

Monday to Friday - From 6.0 p.m. to 8.0 a.m. next day.

Weekends - From 12.0 noon Saturday to 8.0 a.m. Monday.

Bank and Public Holidays - All day.

The main ambulance station at Laburnum Road, Aldershot (Telephone Number: - Aldershot 22244) will continue to receive calls at other times and postal requests should still be sent to the appropriate main station.

CHILD WELFARE

Child Welfare Centres are situated throughout the District at the following places and are held on the dates and at the times given.

These centres are for the attendance of mothers and babies, and children under five. Activities at the clinics, at which a doctor and nurse attend, include advice on feeding and child management, mmunisation, weighing and the distribution of welfare foods and certain medicaments.

During March a child welfare centre was established at Medstead operate on a once-monthly basis.

Centres for children under the age of five years are available is follows:-

Centre	Address	Day of clinic per month	Time
Alton	Inwood Health Clinic	Every Tuesday	2-4 p.m.
Bentley	Memorial Hall	3rd We liesday	2-4 p.m.
Bordon	Military Families Health Centre, Bordon Camp.	Every Thursday	2=4 p.m.
Four Mark	s The Institute, Lymington Bottom.	2nd and 4th Tuesdays	2-4 p.m.
Froyle	Methodist Church School.	1st Friday	11 a.m. -12 noon.
Grayshott	Village Hall, Headley Road.	1st and 3rd Fridays	2-4 p.m.
Headley	Village Hall	2nd and 4th Fridays	2-4 p.m.
Kingsley	Cadet Hut	3rd Friday	3-4 p.m.
Longmoor	Welfare Centre, The Barracks	2nd and 4th Mondays	2-4 p.m.
Medstead	Village Hall	1st Thursday	2-4 p.m.
Oakhanger	Village Hall	3rd Friday	2-2.45 p.m.
Ropley	Church Hall (Baby Clinic)	1st Monday	2.30-4 p.m.
Selborne	Village Hall	1st Wednesday	2-4 p.m.
Whitehill	Congregational Church Hall, Liphook Road.	1st and 3rd Mondays	2-4 p.m.

NATIONAL WELFARE FOODS

in the Alton Rural District:-

National Welfare Foods are distributed from the following centres Centre Times of Opening BENTLEY Bentley Post Office, Business hours. London Road. Child Welfare Centre, 3rd Wednesday in month Memorial Hall. 2-4 p.m. BENTWORTH Mrs. D. C. Butler, By arrangement. Paybank Cottage. BINSTED Mrs. S. M. Dade, By arrangement. 6 Thurstons. BORDON Child Welfare Centre, Every Thursday Military Families Health Centre, 2-4 p.m. Bordon Camp. FARRINGDON Messrs W. & L. Burr, Business hours. Stores and Post Office. FOUR MARKS Mr. J. W. Adams, Tipper's, Business hours. Winchester Road. FROYLE Child Welfare Centre, 1st Friday in month Methodist Church School. 11.0 a.m. to 12 noon. GRAYSHOTT Child Welfare Centre, 1st & 3rd Fridays in month Village Hall. 2-4 p.m. HEADLEY Child Welfare Centre, 2nd & 4th Fridays in month Village Hall. 2-4 p.m. Child Welfare Centre. 3rd Friday in month Cadet Hut. 3-4 p.m. Mrs. J. H. Trapaud, By arrangement. Southwood House, Shalden. LINDFORD Mr. O. Vychodil, Cross Road Stores. Business hours. LONGMOOR Child Welfare Centre, 2nd & 4th Mondays in month The Barracks. 2-4 p.m. MEDSTEAD Child Welfare Centre,

-17-

Village Hall.

Village Hall.

Child Welfare Centre,

OAKHANGER

1st Thursday in month

3rd Friday in month

2-2.45 p.m.

2-4 p.m.

NATIONAL WELFARD FOODS - DISTRIBUTION CLIEBTO (Continued)

ROPLEY
Mr. W. T. S. Biggs,
Forster's Stores,
Gilbert Street.

SELBORNE Child Welfare Centre, Village Hall.

SHALDMI Hrs. J. H. Trapaud, Southwood House.

WEST TISTED

Mr. F. J. Bayley,

Post Office Stores.

WHITEHILL
Child Velfare Centre,
Congregational Church Hall,
Liphook Road.

Messes E. Abeatley & Sons, Beverley Stores, High Road.

WIELD
Mr. A. D. Bentley,
Village Stores & Post Office,
Upper Wield.

Business hours.

1st Wednesday in month

o arrangenen.

es - Lulis.

1st and 3:0 Liondays 2-4 p.m.

Posiness hours.

Business hours.

HEALTH VISITING

The following are the Health Visitors and the areas which they serve:-

Name	Address	District
Mrs. J. E. Morrow, S.R.N., S.C.M., R.F.N., H.V.	13 Whitedown, Alton. (Phone: Alton 2097)	Alton (East), Binsted, Chawton, Farringdon, East & West Worldham, Wyck. Selborne (temporarily)
Miss V. Gawthorp, S.R.N., S.C.M., H.V.	Cherry Croft, Liphook Road, Headley, Bordon. (Phone: Headley Down 33	Grayshott. Blackmoor (temporarily)
Miss I. K. Brown, S.R.N., S.C.M., H.V.	Rosemount, Arford Road, Arford, Headley.	Headley, Binsted (East), Kingsley, Hollywater, Lindford. Longmoor and Oakhanger (temporarily)
Miss A. L. Mitchell, S. R. N., S. C. M., B. T. A., H. V. (Appointed 1.10.63)	22 Gotling's Croft, Selborne. (Phone: - Selborne 219)	Whitehill, Bordon, Bordon Camp.
Miss M. C. Tate, S.R.N., S.C.M., H.V.	Spadgers, Gascoigne Lane, Ropley. (Phone:- Ropley 3237)	Medstead a. residual visiting in Four Marks and Ropley district not covered by Mrs. Cooper. East and West Tisted, and Newton Valence (temporarily)
Miss D. McKenzie, S. R. N., S. M. B(1), R. F. N., H. V.	c/o East Worldham Manor, Nr. Alton. (Phone: Alton 3191)	Alton (West), Beech, Bentley, Bentworth, Froyle, Lasham, Shalden, Wield, Blacknest, Isington.
Mrs. J. M. Cooper, S.R.N., S.C.M., H.V.	Cissbury, Redhill, Four Marks. (Phone: Hedstead 2278)	Ropley and neighbouring area. (Patients of Drs. Happel and Biss only)

MIDWIFERY AND HOME NURSING

Relief duties to cover holidays, sickness or emergency calls are undertaken by neighbouring nurse-midwives.

District served	Name and present address	Service given
Alton (South) Chawton Farringdon	Mrs. M. A. Staples, S.R.H., S.C.M. 1 Pond Cottages, Chawton. (Phone: Alton 2379)	Midwifery and general nursing.
Alton (North) Holybourne Shalden (part)	Miss E. J. Howton, S.R.N., S.C.M., Q.N. 14 Elmwood Close, Alton. (Phone: Alton 3165)	Midwifery and general nursing.
Bentley Binsted Rowledge Froyle E. & W. Worldham	Mrs. K. V. Hutton, S.E.A.N., S.C.M. The Crest, Inhams Road, Holybourne, Alton. (Phone: Alten 3213)	Midwifery and general nursing.
Barford Bramshott Chase Grayshott Headley Common Headley Down (part) Hearn	Miss M. A. Cuff, S.E.A.N., S.C.M. Nurse's Cottage, School Road, Grayshott. (Phone: Hindhead 409)	Midwifery and general nursing.
Lindford Hollywater Headley Headley Down (part) Deadwater Standford Arford Passfield Wishanger	Mrs. R. P. Eames, S.R.N., S.C.M. Lurganboy, Stonehill Road, Headley Down. (Phone: Headley Down 2380)	Midwifery and general nursing
Beech Bentworth Four Marks (part) Lasham Medstead Shalden Wield	Miss M. I. Flory, S.R.N., S.C.M., Q.N. Stretfield, Five Ash Lane, Medstead. (Phone: Medstead 2100)	Midwifery and general nursing.
Ropley and neighbouring area (Patients of Drs. Happel and Biss only)	Mrs. J. L. Copper, S.R.N., S.C.M., Q.N., H.V.Cert. Cissbury, Redhill, Four Marks. (Phone: Medstead 2278)	Midwifery, general nursing and health visiting.

District served	Name and present address	Service given	
Selborne Blackmoor E. & W. Tisted Drift Road Oakhanger Newton Valence Empshott Longmoor Camp	Duties for this area are femorally undertaken by Miss is J. Noviet. 4 Shroot Citse, 1 Tons. (Phone: Aller Not)	Midwifery and general nursing.	
Bordon Camp Bordon Village Whitehill Kingsley Hogmoor Road Fir Grove Shortheath Common	Miss B. F. Goudle S.R.F., S.C.M. No. 2 Bongalow, Infant Velfare Comm. Dorden organ 292 (Resigne 28.2.63)	Midwifery and general no esing.	
NOTE: - Distric' massing and new fory dutice for the area temporarily under taken by Mrs. P. P. Banes, Lurganbay, Stonelill Rood, Headley Down. (Phone: - Headley Down 2 50)			

HOME HALF SARVICE

A scheme of domestic help is available. The helpers are experienced women carefull; wherein for their suitability for the work. They will run the home conefully, their job being to take over the housewife's work.

Home Helps are available for the following types of cases:when the housewife is sick or has to have an operation; when a
new baby is expected; when several members of a household are ill
at one time; and to give help to the elderly and infirm.

Application for a Home Help. weeknowied by a medical certificate, should be made to the District Organ sec. The charge depends on the hours worked and the impose of a small after certain allowances have been made.

Division VI includes the Royal Disc. of Alton and the Divisional Organiser has her tille in the Wm Hall, Petersfield, (Telephone Number: - Petersfield 771/777 - Extension 18) to whom application for a Home Help should be take.

LABORATORY FACILITIES

Bacteriological examinations of linear matter (sputum, swabs etc.) and of water, rulk and focostures are carried out at the Public Health Laboratory, Royal Hampaline County Hospital, Winchester, (Telephone Number: - Winchester 2007).

Chemical analyses of vater, sawage, will and other samples are carried out by arrange and with the Public Auglost. Tratalgar Place, Clive Road, Portsmouth, (Pelanore Number of mouth 23641).

Thanks are expressed to the D. Potto. The Public Health Laboratory Service and the Public Analyst, Portugate, for their ready advice and assistance granted has ng to 7

ANTE-NATAL CLINICS

Clinics are held every Thursday at Alton General Hospital. The medical officers attending the Alton clinics at the end of the year were as follows:-

> - Drs. W. S. Larcombe and E. P. H. Shortt. 1st Thursday

- Dr. M. B. Wilson. 2nd Thursday

- Dr. Helen E. Larcombe. - Mr. A. F. Goode. 3rd Thursday

4th Thursday

Ante-natal relaxation classes are held at the Inwood Health Clinic, Alton, every Wednesday afternoon at 2.30 p.m.

SCHOOL HEALTH SERVICES

Clinics are held as follows:-

- Lord Mayor Treloar Orthopaedic

Hospital, Alton.

- Alton General Hospital. Ear, nose and throat

Dental - At schools.

Ophthalmic and orthoptic - Alton General Hospital.

Child guidance - Health Centre, Winchester.

- Alton General Hospital. Speech therapy

TUBERCULOSIS SERVICES

CHEST CLINICS

Chest clinics which serve this district are as under:-

- Northfield Hospital, ALDERSHOT

Redan Road, Aldershot.

(Phone: Aldershot 20885)

BASINGSTOKE - Basingstoke General Hospital,

> Hackwood Road, Basingstoke.

(Phone: - Basingstoke 1910)

WINCHESTER - Royal Hampshire County Hospital,

> Romsey Road, Winchester.

(Phone: - Winchester 5151)

MASS X-RAY SERVICES

The Mass Miniature Radiography Unit serving this area is:-

Southampton Mass Radiography Unit, 7 Archer's Road,

Southampton.

(Phone: - Southampton 26549)

Dr. M. E. Moore. Medical Director:-

Organising Secretary: - E. Brown, Esq.

VENEREAL DISEASES

Special clinics for the treatment of venereal diseases are available as follows:-

ALDERSHOT

- Aldershot General Hospital, St. George's Road, Aldershot.

Women: Wednesdays 10.30 a.m. to 12 noon. 2.00 p.m. to 4.30 p.m.

Men: Wednesdays 5.00 p.m. to 7.00 p.m.

WINCHESTER

- Royal Hampshire County Hospital, Romsey Road, Winchester.

(Out-patients' Annexe)

Women: Mondays 2.00 p.m. to 4.00 p.m. Men: Saturdays 10.30 a.m. to 12 noon.

AREA WELFARE SERVICES

Area Welfare Officer:-

Mr. W. T. Pepper, 14 King George Avenue, Petersfield. (Phone:- Petersfield 1199)

Monday-Wednesday - 9 a.m to 1 p.m. Friday - 9 a.m to 12 noon

94 Normandy Street, Alton. (Phone:- Alton 3853)

Tuesday - 9.30 a.m. to 12.30 p.m. Thursday - 9.30 a.m. to 12.30 p.m.

Area Mental Welfare Officer:-

Mr. A. C. Wood,
Manor Park House,
Aldershot.
(Phone: - Aldershot 22595)

VITAL STATISTICS BIRTHS

(Table 1)

Total Popu	lation	1959	1960	1961	1962	1963
		25,360	25,000	24,160	25,090	25,560
Live Births Legitimate	Male Female	221 206	236 204	217 203	280 276	267 253
	Total	427	24C	420	556	520
Live Births Illegitimate	Male Female	8 12	15 12	9 13	24 15	27 22
	Total	20	27	22	39	49
Total Live Bir	ths	447	467	442	595	569
Live Birth Rate per 1,000 Total Population		17.6	18.7	18.3	23.7	22.2
England and Wa	les	16.5	17.1	17.4	18.0	18.2

Still Births	Male	3	4	1	6	5
Legitimate	Female	7	11.	3	3	4
	Total	10	8	4	9	9
Still Births	Male	0	0	0	0	-1
Illegitimate	Female	1	0	0	0	0
	Total		0	0	0	1
Total Still Bi	rths	11	8	4	9	10
Still Birth Rate per 1,000 Births (Live and Still)		18.0	16.8	8.9	119	17.2
Total Live and Births	Still	458	475	<i>Щ</i> ;6	604	579

Comparability Factor is 1.08, at the adjusted Live Birth Rate for this District is 23.9, which is the figure for comparative purposes with England and Wales.

VITAL STATISTICS DEATHS

(Table 2)

From		1959	1960	1961	1962	1963
All Causes	Male	132	132	134	156	169
	Female	121	127	153	137	125,
	Totals	253	259	287	293	294
Death Rate per 1,000 total population.		9•9	10.4	11.8	11.7	11.5
Average for En and Wales total populat		11.6	11.5	12.0	11.9	12.2

The Death Rate Comparability Factor for this District is 1.00, allowance thus being made for local differences in the sex and age distribution of the population.

The adjusted Death Rate for this area, therefore, is 11.5.

VITAL STATISTICS (Table 3) INFANT MORTALITY

The state of the s	the three of the state of the state of	AND AND IN SECURITY STATES OF THE PARTY AND	THE RESERVE AND PARTY AND PROPERTY AND PROPERTY AND PROPERTY AND PARTY AND P	CHARLES AND		
Deaths under 1 year of age		1959	1960	1961	1962	1963
(legitimate)	Male	6	3	6	3	1.1
	Fold; ?	11.	C)	2.	6	7
Deaths under 1 year of age	Male	!	^	9	, Congression of the Congression	1
' (illegitimete)	Female	e reading transform all product (files)	el l		0	To the second se
	Totals	, ,		3	10	20
Infant Nortality Rate per 1,000 live births		24.6	8.	18.1	16.8	35.1
England and Wales Rate per 1,000 live births		22.00	2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		21.4	20.9

NEO-NATAL MORTALITY

		1959	1960	1961	1962	1963
Number of Deaths of infants	iale	A Comment of the contract of t	organis de constituire de constituir	2	2	7
under 4 weeks of age,	Female		0	2.	3	2.
(legitimate)	Tetals	, and a substitution with the substitution of	A CONTRACTOR CONTRACTO	1,	5	9
(illegitimate)	Male		U	C	1	i
	Female	An a month diller light of the	S S S S S S S S S S S S S S S S S S S	0	0	1
	Totals	1	1	0	1	11

Percentage of Illegissmate live births - 8.6%
Laternal deaths including abortion - NIL
Laternal Mortol t, Rute - NIL

At motion is drain to the fact that these rates for the Rubal District, owing an the small numbers involved, are not statistically significant and rate of purisons with other areas or earlier years may be misleading.

(Table 4) ANALYSIS OF CAUSES OF DEATH

1. Tuberculosis, respiratory		Disease		Male	Female	Total
3. Syphilitic disease 1 0 1 4. Diphtheria 0 0 0 5. Whooping cough 0 0 0 6. Meningococcal infections 1 0 1 7. Acute poliomyelitis 0 0 0 8. Measles 0 0 0 9. Other infective & parasitic diseases 0 0 10. Malignant neoplasm, stomach 3 2 5 11. Malignant neoplasm, lung, bronchus 14 3 17 12. Malignant neoplasm, breast - 6 6 13. Malignant neoplasm, uterus - 2 2 14. Other malignant & lymphatic neoplasms 17 8 25 15. Leukaemia, Aleukaemia 1 1 2 16. Diabetes 0 0 1 1 17. Vascular lesions of nervous system 18 16 34 18. Coronary disease, angina 36 16 52 19. Hypertension with heart disease 4 3 7 20. Other heart diseases 17 23 40	1.	Tuberculosis, respiratory		1	1	2
4. Diphtheria 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2.	Tuberculosis, other		0	1	1
5. Whooping cough 0 0 0 6. Meningococcal infections 1 0 1 7. Acute poliomyelitis 0 0 0 8. Measles 0 0 0 9. Other infective & parasitic diseases 0 0 0 10. Malignant neoplasm, stomach 3 2 5 11. Malignant neoplasm, lung, bronchus 14 3 17 12. Malignant neoplasm, breast 6 6 13. Malignant neoplasm, uterus 2 2 14. Other malignant & lymphatic neoplasms 17 8 25 15. Leukaemia, Aleukaemia 1 2 2 14. Other malignant & lymphatic neoplasms 17 8 25 15. Leukaemia, Aleukaemia 1 1 2 16. Diabetes 0 1 1 17. Vascular lesions of nervous system 18 16 52 16. Hypertension with heart disease <td>3.</td> <td>Syphilitic disease</td> <td>0 0</td> <td>1</td> <td>0</td> <td>1</td>	3.	Syphilitic disease	0 0	1	0	1
6. Meningococcal infections 7. Acute poliomyelitis 8. Measles 9. Other infective & parasitic diseases 9. Other infective & parasitic diseases 10. Malignant neoplasm, stomach 11. Malignant neoplasm, lung, bronchus 11. Malignant neoplasm, breast 12. Malignant neoplasm, uterus 13. Malignant neoplasm, uterus 14. Other malignant & lymphatic neoplasms 17. Wascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 19. Hypertension with heart disease 10. Other heart diseases 11. Other circulatory disease 12. Influenza 13. Pneumonia 14. Spronchitis 15. Other diseases of respiratory system 16. Ulcer of stomach and duodenum 17. Castritis, Enteritis and Diarrhoea 18. Nephritis and Nephrosis 19. Hyperplasia of Prostate 19. Hyperplasia of Prostate 10. Other defined & ill-defined diseases 11. Other defined & ill-defined diseases 12. Suicide 13. Motor vehicle accidents 13. Suicide 14. Other accidents 15. Suicide 16. Homicide and operations of war 18. Other defined and operations of war 19. Accompanies of the defined diseases 19. Accompanies of the defined diseases 10. Accompanies of the defined diseases 11. Accompanies of the defined diseases 12. Suicide 13. Motor vehicle accidents 13. Suicide 14. Other accidents 15. Suicide 16. Homicide and operations of war 19. Other defined and operations of war	4.	Diphtheria	0 •	0	0	0
7. Acute poliomyelitis 0 0 0 0 8. Measles 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5.	Whooping cough	• •	0	0	0
8. Measles	6.	Meningococcal infections	• •	4	0	_ 1
9. Other infective & parasitic diseases . 0 0 0 10. Malignant neoplasm, stomach . 3 2 5 5 11. Malignant neoplasm, lung, bronchus . 14 3 17 12. Malignant neoplasm, breast	7.	Acute poliomyelitis	• •	0	0	0
10. Malignant neoplasm, stomach	8.	Measles	• •	0	0	.0
11. Malignant neoplasm, lung, bronchus 14 3 17 12. Malignant neoplasm, breast	9.	Other infective & parasitic disease	s.	0	0	0
12. Malignant neoplasm, breast 6 6 13. Malignant neoplasm, uterus 2 2 14. Other malignant & lymphatic neoplasms 17 8 25 15. Leukaemia, Aleukaemia 1 1 2 16. Diabetes 0 1 1 17. Vascular lesions of nervous system 18 16 34 18. Coronary disease, angina 36 16 52 19. Hypertension with heart disease 4 3 7 20. Other heart diseases 17 23 40 21. Other circulatory disease 4 4 8 22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 3 2 5 35. Suicide 0 1	10.	Malignant neoplasm, stomach	• •	3	2	5
13. Malignant neoplasm, uterus	11.	Malignant neoplasm, lung, bronchus	0 0	14	3	17
14. Other malignant & lymphatic neoplasms 17 8 25 15. Leukaemia, Aleukaemia 1 1 2 16. Diabetes 0 1 1 17. Vascular lesions of nervous system 18 16 34 18. Coronary disease, angina 36 16 52 19. Hypertension with heart disease 4 3 7 20. Other heart diseases 17 23 40 21. Other circulatory disease 4 8 22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 0	12.	Malignant neoplasm, breast	• •	9.60	6	6
15. Leukaemia, Aleukaemia 1 1 2 16. Diabetes 0 1 1 17. Vascular lesions of nervous system . 18 16 34 18. Coronary disease, angina . 36 16 52 19. Hypertension with heart disease . 4 3 7 20. Other heart diseases . 17 23 40 21. Other circulatory disease . 4 4 8 22. Influenza . 0 1 1 23. Pneumonia . 10 12 22 24. Bronchitis . 9 3 12 25. Other diseases of respiratory system . 1 0 1 26. Ulcer of stomach and duodenum . 2 0 2 27. Gastritis, Enteritis and Diarrhoea . 0 0 0 28. Nephritis and Nephrosis . 1 0 1 29. Hyperplasia of Prostate . 0 - 0 31. Congenital malformations . 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents . 6 2 8 34. All other accidents . 3 2 5 35. Suicide . 0 1 1 36. Homicide and operations of war . 1 0 1	13.	Malignant neoplasm, uterus	• •	-	2	2.
16. Diabetes 0 1 1 1 17. Vascular lesions of nervous system 18 16 34 18. Coronary disease, angina 36 16 52 19. Hypertension with heart disease 4 3 7 20. Other heart diseases 17 23 40 21. Other circulatory disease 4 4 8 22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system . 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 6 2 8 35. Suicide 0 1 1	14.	Other malignant & lymphatic necplass	ms	17	8	25
17. Vascular lesions of nervous system 18 16 34 18. Coronary disease, angina 36 16 52 19. Hypertension with heart disease 4 3 7 20. Other heart diseases 17 23 40 21. Other circulatory disease 4 8 22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 6 2 8 35. Suicide 0 1 1	15.	Leukaemia, Aleukaemia	• •	1	1	2
18. Coronary disease, angina 36 16 52 19. Hypertension with heart disease 4 3 7 20. Other heart diseases 17 23 40 21. Other circulatory disease 4 4 8 22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 0 30. Pregnancy, Childbirth and Abortion 5 3 8 32. Other defined & ill-defined diseases 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents	16.	Diabetes		0	1	1
19. Hypertension with heart disease 4 3 7 20. Other heart diseases 17 23 40 21. Other circulatory disease 4 4 8 22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system . 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 6 2 8 35. Suicide 0 1 1	17.	Vascular lesions of nervous system	• •	18	16	34
20. Other heart diseases	18.	Coronary disease, angina	• •	36	16	52
21. Other circulatory disease 4 4 8 22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases 13 15 28 33. Motor vehicle accidents 3 2 5 34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1 </td <td>19.</td> <td>Hypertension with heart disease</td> <td></td> <td>4</td> <td>3</td> <td>7</td>	19.	Hypertension with heart disease		4	3	7
22. Influenza 0 1 1 23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	20.	Other heart diseases		17	23	40
23. Pneumonia 10 12 22 24. Bronchitis 9 3 12 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases 1 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	21.	Other circulatory disease	• •	4	4	8
24. Bronchitis 9 3 12 25. Other diseases of respiratory system . 1 0 1 26. Ulcer of stomach and duodenum . 2 0 2 27. Gastritis, Enteritis and Diarrhoea . 0 0 0 28. Nephritis and Nephrosis . 1 0 1 29. Hyperplasia of Prostate . 0 - 0 30. Pregnancy, Childbirth and Abortion . 0 0 0 31. Congenital malformations . 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents . 6 2 8 34. All other accidents . 3 2 5 35. Suicide . 0 1 1 36. Homicide and operations of war . 1 0 1	22.	Influenza	0 0	0	1	1
25. Other diseases of respiratory system . 1 0 1 26. Ulcer of stomach and duodenum . 2 0 2 27. Gastritis, Enteritis and Diarrhoea . 0 0 0 28. Nephritis and Nephrosis . 1 0 1 29. Hyperplasia of Prostate . 0 - 0 30. Pregnancy, Childbirth and Abortion . 0 0 0 31. Congenital malformations . 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents . 6 2 8 34. All other accidents . 5 5 35. Suicide . 0 1 1 36. Homicide and operations of war . 1 0 1	23.	Pneumonia	• •	10	12	22
26. Ulcer of stomach and duodenum 2 0 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 6 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	24.	Bronchitis	• •	9	3	12
27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 6 2 5 5 5 5 Suicide 0 1 1 1 6 6 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7	25.	Other diseases of respiratory syste	m.	1	0	1
28. Nephritis and Nephrosis 1 0 1 29. Hyperplasia of Prostate 0 - 0 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 6 2 8 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	26.	Ulcer of stomach and duodenum	• •	2	0	2
29. Hyperplasia of Prostate 30. Pregnancy, Childbirth and Abortion 31. Congenital malformations 32. Other defined & ill-defined diseases 33. Motor vehicle accidents 34. All other accidents 35. Suicide 36. Homicide and operations of war 30. O	27.	Gastritis, Enteritis and Diarrhoea		0	0	0
30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	28.	Nephritis and Nephrosis	· •	1	0	1
31. Congenital malformations 5 3 8 32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	29.	Hyperplasia of Prostate	• 0	0	C200	0
32. Other defined & ill-defined diseases . 13 15 28 33. Motor vehicle accidents 6 2 8 34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	30.	Pregnancy, Childbirth and Abortion	• •	0	0	0
33. Motor vehicle accidents 6 2 8 34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	31.	Congenital malformations	0 0	5	3	8
34. All other accidents 3 2 5 35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	32.	Other defined & ill-defined disease	s.	13	15	
35. Suicide 0 1 1 36. Homicide and operations of war 1 0 1	33.	Motor vehicle accidents	0 0	6	2	8
36. Homicide and operations of war 1 0 !	34.	All other accidents		3	2	
Do. Homrerae and operations of the	35.	Suicide	• •	0	1	
All causes 169 125 294	36.	Homicide and operations of war	v •	1	0	1
		All causes	• • •	169	125	294

(Table 5) THE SEX AND AGE DISTRIBUTION OF DEATHS

Age	Male	Female	
Under ; year	12	8	A TAKE CONTRACTOR
1 - 9 years	5	4	Chorace in
10 - 19 years	5	0	
20 - 29 years	3	-9	To the second of
50 ~ 39 years	2	4	
40 - 49 years	6	1	BART CIPAN
50 - 59 years	14	12	Condo Ma
60 - 69 years	37	22	T. Change
70 - 79 years	43	35	
80 - 89 years	35	31	100 m on 100 m
90 - 99 years	7	7	
100 and over	, 0	0	No. of the last of
			To have all and
	169		
Total	29	4	

(Table 6) PREVALENCE OF INFECTIOUS DISEASES

The following is an analysis of the notifications of infectious diseases received during the year, with the five preceding years for comparison:-

Disea se			Totals	for				
	1958	1958 1959 1960 1961 1962 196						
Scarlet Fever	6	29	10	5	1	4		
Whooping Cough	36	26	35	10	32	11		
Acute poliomyelitis (paralytic and non-paralytic)	4	2@	0	0	0	0		
Measles	101	536	35	297	31	290		
Diphtheria	0	0	0	0	0	0		
Acute pneumonia	20	4	2	3	1	0		
Dysentery	6	5	21	4	0	1		
Typhoid & para- typhoid fever	0	0	0	0	0	0		
Erysipelas	1	0	2	3	4	0		
Meningococcal infection	1	0	0	0	0	О		
Meningitis unspecified	0	0	0	0	0	0		
Food poisoning	1	0	0	0	0	0		
Puerperal pyrexia	1	2	0	2	0	1		
Ophthalmia neonatorum	2	0	0	0	0	0		
Totals:-	179	604	105	324	69	307		

[@] One of these cases was subsequently not confirmed as being poliomyelitis.

THE RURAL DISTRICT OF ALTON

ANNUAL REPORT

OF THE

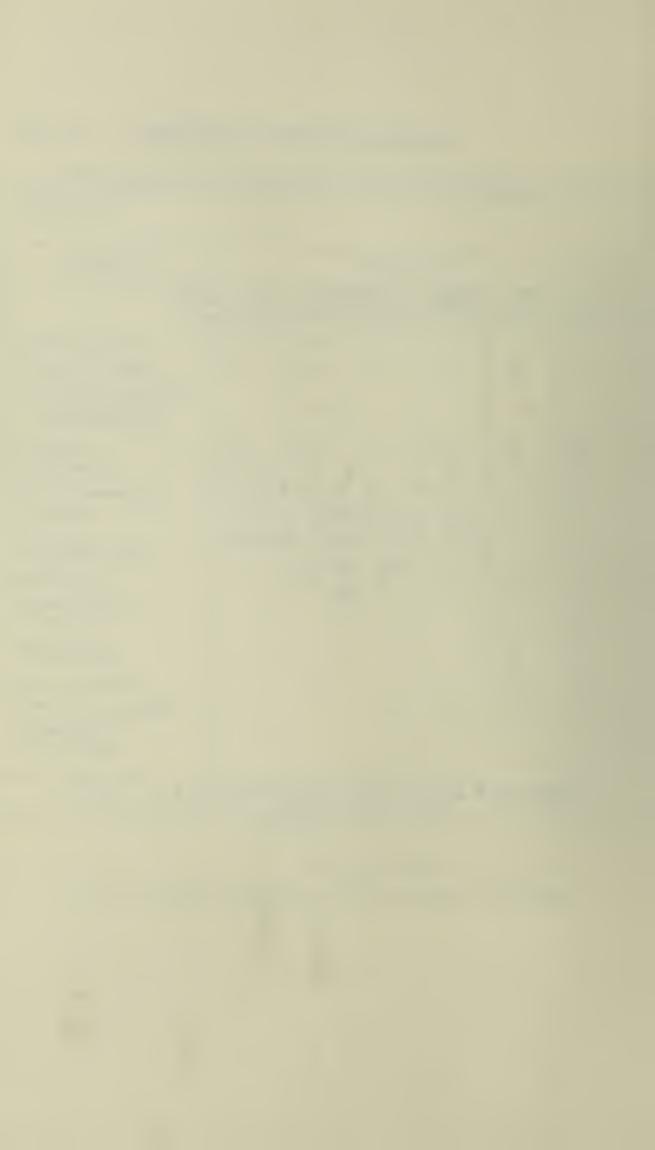
CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR

1963

SANITARY CIRCUMSTANCES OF THE AREA

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ALTON RURAL DISTRICT COUNCIL

Telephone Number: -- ALTON 2263

Barton End, Lenten Street, Alton, Hants.

To: - The Chairman and Members of the Alton Rural District Council.

Mr. Chairman, Ladies and Gentlemen,

I submit herewith my report on the Sanitary Circumstances of the Rural District of Alton for the year 1963.

The report deals in detail with the work carried out under the various statutory requirements. The statistics are selfexplanatory and I do not feel any further comment necessary except in respect of two items, i.e., sewerings and caravans.

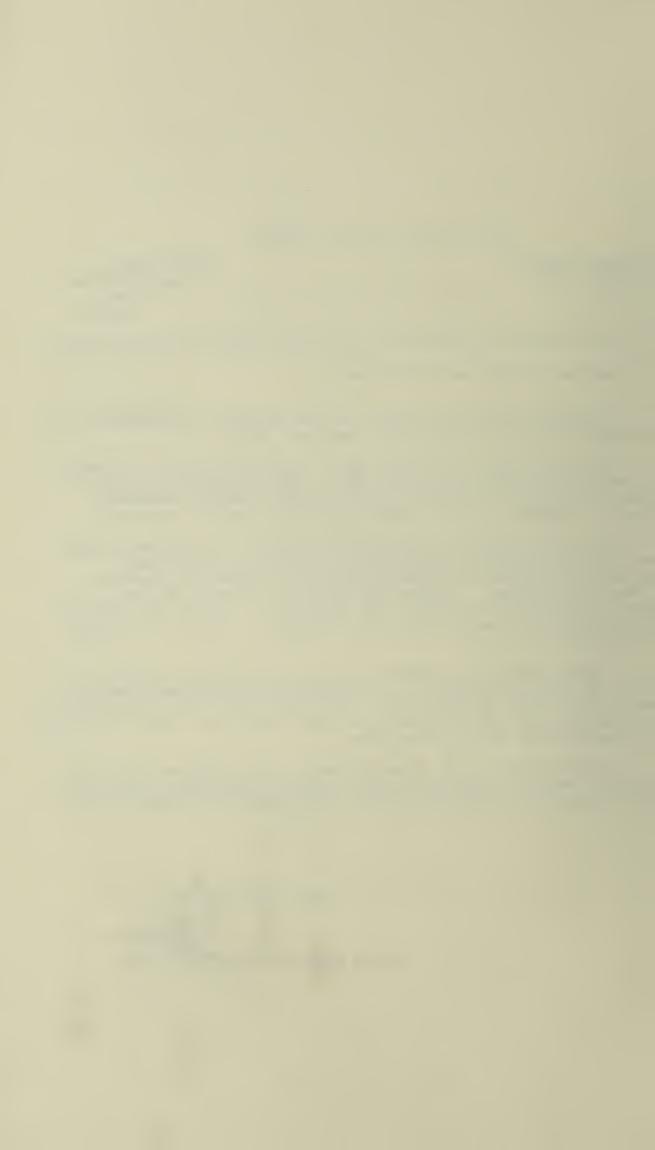
With the increase of private development in the Four Marks area and the reliance of drainage on sentic tank systems, difficulties lie ahead unless provision is made for sewerage in the near future. Comment is made in my report on the association between caravans and housing by I feel that further mention should be made here as the problem is liable to become cumulative.

I would take this opportunity of expressing my appreciation to the Chairman and Members of the Public Health Committee for their support and encouragement during the year and of recording my thanks to the officers of other departments for their assistance and co-operation on all occasions.

I particularly wish to acknowledge the continued loyal and efficient work of the Staff of the Public Health Department and to thank them for all their help and co-operation throughout 1963.

Yours obedien

CHIEF PUBLIC IDAL TINSPECTOR



PART II REPORT OF THE CHILE PUBLIC HEALTH INSPECTOR

SANT ARY CIRCULSTANCES OF THE AREA

WATER SUPPLY

The following talls indicates the number of properties and proximate population sectors by main water:

Parish	D'ETE	1100000	Nc. f	Terimated	Estimated
	' - • := 3) .	10 Tu = }	louner l outrated	populacion supplied	total
ganggangganggangang organisansis, overes () so to — end solve (a so the so to the section by the section of	No of the second	and the gar is the top of the gar in the gar	The second second of the second secon	DODUTERSTOIL
Pen dey	= 3 (15)	255	258	850	850
Bentmarth	10/20	138	188	570	600
Binsted	7.770	567	2 5	1,460	1,600
Chav ter	27.224	155	1.	470	430 .
East Tintod	· 6 5.	nº	65	180	180
Farringdo.	: 405	103	175	500	520
Four Marks	9 30 7 1	627	572	1,450	1,700 .
Fro, le	1.849	225	218	700	750
Grayshott	f ** ** **	585	579	1,010	· ,650
Headley	_ s _ ;	1,:65	1,125	2,900	3,050
Kingsley	7,54)	149	143	4.30	450
Lasham	, 797	110	4.6	180	200
Meds ead	,009	572	448	1,040	1,400
Newton Valous	2, 109	85	84	260	265
Ropley	3,704	$\frac{1}{2}$	22.43	1,060	1,300
Selborne	1,030	370	360	1,000	1,100
Shalder	1.160	3/43	129	390	450
West Tasts	9 116	-5	32	160	200
Witchill	7,50%	9 - 11	1,1.53	3,460	4,,000
viela.	9 1 24	13	5.6	190	250
Worldham	2,013	112	90	270	350
TOTALS	- 5 L	7, 200	6,803	1.,130	21,265

apply to private the Ferrison of / itshill, the figures shown apply to private in section and do not include any living accommodation in the Erich and Longwood Milliamy Camps which have their own pipeline a continue (approximately 500 quarters).

four (resident) is the Park and Interest of Phase four sites are liminable to the Park and the Color of the caravans, estimated populations. In the water might be an caravan whilst the remain notation, and taken population and the remain of the caravan whilst the remain notation, and taken population and the remains standpipes for interest.

All built-up areas of the District have piped main supplies from the Wey Valley Water Company and the Mid-Wessex Water Company. There are a few isolated areas not supplied by mains for economic reasons, the supplies in these parts being from wells and springs. There are also still a number of properties in the Four Marks, Medstead and Ropley areas relying on underground rain-water storage tanks but these are slowly reducing where the mains are available.

The mains supplies during the year have been satisfactory, both with regard to quantity and quality. Samples are regularly taken for analysis by the water undertakers and copies of the analyst's reports are submitted to the Council.

As aforesaid, there still remain isolated pockets of development which rely upon sources of water supply other than the mains. Samples were taken from these supplies during the year as follows:-

(1) Bacteriological and chemical - satisfactory.

These samples were from an estate supply, the source being a lake fed from springs from which the water is rammed to overhead storage tanks. This supply is sampled regularly in view of the number of properties supplied, i.e. 10.

(2) Bacteriological and chemical - satisfactory.

These samples were follow-ups from the previous year from a well supplying a large property undergoing extensive alterations. The spring supply proved unsatisfactory and was discontinued.

(3) Bacteriological - satisfactory.

This sample was from an underground storage tank which became suspect through a defective pump, subsequently repaired.

(4) Bacteriological - satisfactory.

This sample was taken from a deep well at a property which also has a main supply. It was taken at the request of the owner who indicated she intended to discontinue the main supply if fluorine was added and wished to be assured of a satisfactory alternative supply.

(5) Bacteriological - Not satisfactory.

These samples were taken from a borehole on a farm, the owner having a main supply, but considered discontinuing for economic reasons. As a result of the sampling, it was decided to retain the houses (4) on the mains supply and to use the borehole for agricultural purposes only.

(6) Bacteriological - satisfactory.

These samples were taken consequent upon the failure of the mains supply to a high level storage tank resulting in a number of houses being without water for 2-3 days. Static water tanks were provided by the water undertakers whilst repairs were carried out. Samples were taken from these static tanks and also from selected dwellings in the area after the mains supply was reinstated.

(7) Bacteriological - 2 unsatisfactory and 1 satisfactory.

These samples were from a new underground rain-water storage tank provided for a new dwelling. A dug well was proved unsatisfactory so the rain-water storage tank was provided. Unfortunately, for the first two samples the owner filled the tank from the well. After cleaning out and re-filling with clean water, the supply was passed as satisfactory.

m32m

(8) Bacteriological - satisfactory.

These samples were taken from a spring supplying two properties. These properties are isolated and the mains are not reasonably available.

(9) Bacteriological - unsat stactory.

These samples were from a well supplying an isolated cottage. The well is being pumped out and lined and further sampling will proceed.

(10) Bacteriological - unsatisfactor.

These samples were from a well and arrangements are proceeding for this and adjacent properties to be connected to the mains by a long service pose.

(11) Bacteriological - 4 satisfactory ... unsatisfactory.

These samples were from two rain-water storage tanks supplying four cottages () connected to the main). As a result the two cottages supplied from the unsatisfactory tank have been connected to the main.

Total number of samples taken; -

Bacteriological 48) Chemical 2) 50

SWIMMING POOLS

There are no public swimming pools in the District but there are two restricted use pools.

One, in Bordon Camp, is for the use of military personnel and families only and is under constant supervision by the Army Hygiene Section.

The other, at Grayshott School, is for the use of the school children only, under the supervision of the teaching staff. It has a filtration and chlorination plant and samples for analysis were found satisfactory.

SEWERAGE

Areas of the District already sewered are as follows:-

PARISH		ALEA AND TREATMENT
BENTLEY	rimo	Part, e fluent treated by broad land irrigation
BINSTED	***	Holt Pound aree, with discharge into the sewers of the Facultum Urban District Council.
GRAYSHOTT	792	The whole built-up area, with discharge into the Council's own treatment works at Lindford.
HEADLEY	-	Headley Down and Arford areas, with discharge into the Lindford treatment works.
WHITEHILL	,599)	Lindford, Bordon and Whitehill areas, with discharge into the Lindford treatment works.
		Greathan area, wit lischarge into the sewers

The Military Camp areas of Bordon and Longmoor, including approximately 500 quarters, are sewered and all dwellings connected. The Bordon Camp area discharges into the Council's own treatment works at Lindford but the Longmoor Camp area discharges into the War Department's own works.

The Council receives into its works at Lindford sewage from adjacent areas of the Haslemere Urban District Council and Hambledon Rural District Council.

A scheme for the built-up area of the Parish of Selborne has passed the enquiry stage and a scheme is under preparation for a new works at Bentley to take sewage from Bentley, Froyle and Binsted.

Generally the larger Council housing estates where sewers are not available are provided with their own treatment plants.

DOMESTIC DRAINAGE

During the year connections to the Council's sewers continued steadily as also did the provision of new septic tank systems in areas not provided with sewers.

Sewer connections were as follows:-

Parish	Area	Connections during 1963	Total connections to date
Binsted	Holt Pound	3	80
Grayshott		29	र्गभूम
Headley	Arford, Headley Down	7474	649
Selborne	Drift Road		12
Whitehill	Greatham Lindford,	18	36
	Bordon, Whitehill	110	1,108
TOTALS:-		204	2,329

These figures exclude approximately 500 military dwellings at Bordon and Longmoor and three residential caravan sites at Whitehill, licensed for 231 caravans. All three sites are connected to the sewer, one with 99 caravans having individual water closets and waste water drains: the other two having communal facilities.

INSPECTION AND SUPERVISION OF FOOD

Food and Drug legislation divides enforcement provisions between District Councils and Food and Drugs Authorities. The Food and Drugs Authority for this District is the Hampshire County Council.

Generally speaking the division is that the District Council is responsible for the provisions regarding purity of food, i.e., fitness for human consumption, whereas the Food and Drugs Authority is responsible for the provisions relating to adulteration, misrepresentation, labelling and the like.

A report on the work of the Food and Drugs Authority appears later on in this section (Pages 39-40).

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There are no slaughterhouses in the District. The Slaughterhouse Act of 1958 required each local authority to review and report to the Minister of Agriculture, Fisheries and Food on the existing and future requirements of their respective districts for slaughterhouse facilities, and on the facilities either available or likely to become available to meet these requirements.

It was considered, after due consultation with interested parties, that the existing facilities in neighbouring and nearby districts were adequate and a report was made accordingly.

The following foodstuffs were inspected in shops and stores and surrendered for condemnation:

Carcase Meat

Beef - 16 lbs.

Pork - 70 lbs.

Bacon - 30½ lbs.

Minced Meat - 29 lbs.

Ducks - 41 carcases

Frozen Foods

Fish - 97 packets
Vegetables - 100 packets
Pastry - 11 packets
Meat products - 17 packets
Sundry - 33 packets

Tinned Food

Meat (75 tins) - 325¾ lbs. Fish (4 tins) - 4 lbs. Cream (6 tins) - 6 lbs. Milk (4 tins) - 3¾ lbs. Tomatoes (7 tins) - 14¼ lbs.

Miscellaneous

Flour - 3 lbs.
Butter - 3 lbs.
Margarine - $14\frac{1}{2}$ lbs.
Sundry - 2 packets

With canned foods, the usual causes of unfitness for human consumption were either defects in the containers, resulting in simple decomposition or bacterial or chemical action within the food itself due mainly to incomplete sterilisation of the contents during processing or chemical inter-action, resulting in the production of gas and subsequent blowing of the containers.

Surrender of the frozen food was occasioned through break-downs of refrigerators, mostly happening over weekends.

MILK

All milk retailed in the District has to be covered by one of the Special Designations - "Pasteurised", Sterilised" or "Tuber-culin Tested".

Licences to use a Special Designation in relation to milk are issued by the Council under delegated powers from the Hampshire County Council.

Those in force throughout the year were as follows:-

- (1) Pasteurised Dealers' licences 4
- (2) Tuberculin Tested Dealers' licences 3

The Milk and Dairies (General) Regulations require the Council to keep a register of persons carrying out the trade of Milk Distributor at or from premises in their district and also of premises used as dairies (other than dairy farms).

Three such persons and three such premises are registered.

--00--

Continued concern was expressed in many quarters about the incidence of brucella organisms in raw tuberculin-tested milk. This organism can cause undulant fever in man. Despite the vaccination schemes against brucella infection, difficulty in eliminating the organism from raw milk is still experienced. From a public health point of view, danger of infecting man via the milk supply could be prevented if all milk for human consumption was to be pasteurised.

ICE CREAM

There are no ice cream manufacturers in the District.

There are 65 premises registered for the storage and sale of ice cream. All these premises are village shops and stores retailing pre-packed ice cream from refrigerators.

FOOD HYGIENE REGULATIONS

These Regulations contain provisions in respect of the hygienic handling of food and the construction and maintenance of premises where food is handled.

A memorandum on the provisions of the Regulations has been circulated to the occupiers of all food premises in the District.

All the above premises are either wholesale or retail. There are no food manufacturers.

Routine inspection of food premises continued during the year. Generally the standard was good but a few cases of minor infringements were dealt with by informal notice. In all cases the requirements were carried out immediately.

RODENT CONTROL

Under the Prevention of Damage by Pests Act, 1949, the primary obligation is upon the Council to ensure that, so far as is practicable, its area is kept free from rats and mice. The Act does not relieve the owners or occupiers of premises of their responsibility for the actual destruction of rats and mice.

In accordance with the above, the Council's Rodent Officer makes regular inspections of agricultural, industrial and commercial properties, drawing the attention of occupiers to any infestation by these rodents, and advising when necessary on methods of treatment etc.

Although a general service of treatment is not given, it is found desirable in some cases affecting such premises, particularly where the infestations affect more than one property, for a treatment service to be given upon charge on an "ad hoc" basis. Other than this, no contract work is undertaken.

As regards private houses, however, a free treatment service is given upon request.

General Inspections and Treatments

General inspections and treatments were carried out throughout the District as follows:-

	Totales of the second of the s	Type of Property					
	Comeil	Private	Agricult -ural	Other	Total		
Number of properties in District	îO	6,972	612	370	7,964		
Number of properties inspected	10	357	147	108	622		
Number of properties infested	10	349	28	41	428		
Number of properties treated	10.	342	28	40	420		

Under the general heading "Type of Property", Council houses are included under column "Private" whereas the column "Council" includes refuse tips, sewage works, depots and the like used in connection with the functions of the Council.

The tables relate only to the number of properties inspected and/or treated and not to the number of actual inspections or visits. Treatments always involve several visits during the work and follow-up visits subsequently to ensure total clearance of infestation.

The Council properties are visited regularly once a month and oftener if found necessary.

The number of inspections and/or visits actually made were:-

Council properties - 87
Private dwelling houses - 1,033
Agricultural premises - 231
Business and other premises - 218

TOTAL:- 1,569

There are no problems involved in sewer infestations as all the sewers are post-war.

Periodically test baits are laid in the more vulnerable sections but so far no "takes" have been recorded. Should at any time a "take" be found, then the whole of the affected system would be treated.

As with water supply and sewerage, the Military Authorities have their own arrangements for rodent control in Bordon and Longmoor Camps, but whenever necessary, as happened two or three times during the year, the Council's Rodent Officer co-operated with the Military Authorities in problem cases.

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In addition to the service of rodent control, assistance was also given to the public in connection with other infestations as follows:-

Wasps' nests destroyed .13
Treatments for flies ..6
Treatments for fleas ..4
Treatments for ants ..6
Treatments for bees ..3
Treatments for bats ..1
Treatments for bed bugs ..1
Treatments for cockroaches ..3

NOISE ABATEMENT ACT, 1960.

The above Act came into force in November, 1960, and under Section 1, noise or vibration which would amount to a nuisance at common law, becomes a statutory nuisance which can be dealt with according to the procedure provided in Part III of the Public Health Act, 1936.

Apart from statutory action by a local authority, three or more occupiers of land or premises who are aggrieved by a noise or vibration nuisance may make a complaint to a magistrate.

The Act does not apply to noise or vibration caused by aircraft or by statutory undertakers in the exercise of their powers.

No complaints were received during the year.

ACCOMMODATION FOR HOP-PICKED'S

Control over accommodation for hop-pickers provided by farmers is by means of Byelaws made by the Council under Section 270 of the Public Health Act, 1936.

These Byelaws contain provisions relating to repair, cleanliness, overcrowding, cooking and sanitary facilities, and water supply etc.

The number of huts in use and of pickers employed has declined enormously since the installation of hop-picking machines which are operated mainly by local labour.

COMMON LODGING HOUSES

There are no such premises in the District.

PET ANIMALS ACT, 1951.

There is one shop only licensable under this Act.

Several inspections were made during the year without cause for any action.

FOOD SAMPLING

I am indebted to Mr. J. S. Preston, M. I. W. M. A., Chief Inspector of Weights and Measures, Hampshire County Council, for the following information which he has kindly supplied:-

1. During the year ended the 31st December, 1963, 380 samples were procured under the Food and Drugs Act, 1955, within the area of the Alton Rural District Council.

2. Milk Samples

348 samples of milk, including 59 of Channel Islands, were obtained, 26 of the samples being deficient of fat and four adulterated with added water. None of the fat deficiencies involved any prejudice to the purchaser, however, as in each case these affected samples from individual churns were included in larger consignments of milk from the producers concerned, the average fat content of each consignment being of the required standard. In each case, the milk was being supplied to wholesale dairies for processing and bottling and that from each producer was being mixed together on arrival at the dairies. Consequently, no further action was called for in these instances.

With regard to the four samples which showed added water, three were from farm tanks and one from a separate churn, the proportions being 4 per cent on 109 gallons, 1 per cent on 150 gallons, 1 per cent on 197 gallons and ½ per cent on 7½ gallons. Legal proceedings were taken in respect of the 4 per cent adulteration and these resulted in the producer concerned being fined £5 and ordered to pay £13. 10. 0. costs. It was not possible to ascertain the actual cause of the adulteration but it appeared that it might have been due to water inadvertently passing into the milk tank during the milking process. In view of the relatively stall discrepancies involved in the other samples which contained vater, warnings were given to the producers affected and subsequent repeat samples were satisfactory.

Three milk samples were found to contain antibiotics, stated as penicillin, but the amount did not exceed 0.04 international units per millilitre. The attention of the producers was drawn to the results and, in each case, further samples were free from contamination.

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3. Miscellaneous Samples

32 samples of articles other than milk were procured, two only being unsatisfactory. These affected pork sausage meat, which contained only 50 per cent of meat, and a sample of steak and kidney pie in which a piece of hide with hairs attached to it was present.

Although there is no standard for pork sausages and pork sausage meat, they are normally found to contain not less than 65 per cent of meat and on this basis, the sample in question was considered unsatisfactory. The matter was taken up with the producer, against whom there had been no previous complaint, and in the circumstances legal proceedings were not taken but the vendor was warned. The producer of the steak and kidney pie was prosecuted in respect of the foreign matter and he was fined £5, with £8. 10. 0. costs. This case arese as a result of a complaint from a member of the public who discovered the offending matter whilst he was eating the pie.

4. General

During routine visits to traders, attention was given to the provisions of the Labelling of Food Order and the Pharmacy and Medicine Act, with regard to their application to the labelling and description of food and drugs.

CARAVANS

Caravan sites are now controlled under the Caravan Sites and Control of Development Act, 1960, which came into force on the 29th August, 1960, repealing Section 269 of the Public Health Act, 1936, in so far as caravans are concerned.

This Act provided a new licensing system administered by District Councils to secure that all caravan sites, after Planning permission has been obtained, are properly equipped and run.

As far as new sites are concerned, the first stage is a decision by the Planning Authority, (for this area the Hampshire County Council) as to whether the proposed site is or can be made suitable for caravan use. The second stage is how the site should be regulated and equipped, a matter for the District Council under licensing powers.

The District Council has formulated a comprehensive list of conditions including alternatives and these are applied according to the nature of the application, i.e., single caravans, multiple caravans, duration of approved period, commercial, non-commercial and holiday sites.

Generally speaking multiple sites present no special problems as they are, except for the non-commercial (works employees only) sites, run for profit and economic considerations ensure that standards are maintained.

As regards individual caravans, however, problems do arise, particularly where no prior application is made for Planning permission and many visits usually are necessary after the presence of the particular van becomes known to regularise the position. In the majority of cases, Planning permission is not forthcoming as it is the policy of the Planning Authority not to permit the stationing of individual caravans other than in most exceptional circumstances, caravans being considered by them to be sub-standard housing accommodation, detrimental to the amenities of the area.

The problem them arises of dealing with the families oncerned, most of whom are hardship cases very often not able to fford the rents chargeable by the commercial site operators.

The caravan problem is generally one of housing and until ufficient housing at a rent which can be afforded is obtainable, then he caravan will remain as a form of dwelling, although, of course, here are a number of people who prefer this style of living and who ust be catered icr.

The problem in this District is also accentuated by restrictons on the licens ng of caravans in other parts of Southern England, esulting in a pressure on this area where approval has been given to wo large sites at Bordon, described later in this report, which are by largely occupied by families with no district connections and who have the main also work outside the area.

The caravan position as regards this District is as follows:-

- (1) Commercial site for 120 residential caravans at Bordon, in the Parish of Whitehill. licensed to the 31st December, 1971.

 This site is still being developed and is provided with water closets and waste water drainage to the sewer, electricity and main water. At the end of the year there were 39 caravans on the site.
- (2) Commercial site for 99 residential caravans at Bordon, in the Parish of Whitehill, licensed to the 31st July, 1975. This site is still in course of development; each van has its own water closet, waste water gulley and mains water connection, with drainage to sewer. Electricity supplies are awaiting the installation of equipment by the Electricity Board. At the end of the year there were 99 caravans on the site.
- (3) Commercial site for 12 residential caravans at Bordon, in the Parish of Whitehill, licensed to the 31st December, 1963. This smaller site has water closets and waste water disposal points connected to the sewer, main water and electricity.
- (4) Commercial site for 25 residential caravans at Hollywater, in the Parish of Whitehill, licensed to the 31st December, 1965. This site is occupied by the didical (semi-gypsy) type of dweller and has chemical closets, main water standpipes and waste water soakaways. The sewer is not available.
- (5) Commercial site for 70 car wans at Symondstone, in the Parish of Headley, licensed permanently for holiday occupation only from May to October each year.

 This site has been in existence for very many years and is used entirely by owner/occupiers with no residential use.

 Each caravan has its own chemical closet and main water standpipes are sited at convenient points. The site is run in conjunction with a farm and the owner has it under constant supervision.
- (6) Site for 70 caravans at Lasham Airfield, in the Parish of Lasham, licensed permanently for the use of persons connected with gliding.

 Main water is provided by means of standpipes and most caravans have their cwn chemical closets. In addition, there is a range of closets provided by the Gliding Society. Proposals are in hand for a new club house which will include a number of water closets and showers to be available for the caravanners.

Apart from the above there are two small works sites licensed with use restricted to employees only. In both cases some employees of the organisations concerned spend varied periods in different parts of the country in connection with their employment, returning to base in between.

There is also one site, licensed permanently in the Parish of Whitehill, used as showmen's winter quarters, use being restricted to members of the Showmen's Guild.

Licence applications for single caravans were received and dealt with during the year as follows:-

- (1) 8 were approved and/or renewed for periods of 1-2 years for residential accommodation, mainly in gardens of private houses.
- (2) 9 were approved for applicants during the erection of a dwelling on the same site, the period of the licences being limited to the completion date of the dwelling.
- (3) 14 applications were refused Planning permission and were, therefore, not licensable. (Upon appeal two applications were granted approval and were subsequently licensed and included in (1) above.

At the end of the year there were 16 licences in force for single caravans in gardens etc. of private houses, and 6 in force during erection of dwelling on the same site as the particular caravan.

PETROLEUM ACTS

The storage of petroleum spirit and mixtures containing petroleum spirit is subject to strict control by annual licensing. All licences contain conditions based on the "model code" of the Home Office.

93 licences were issued and 4 new installations inspected and tested. Routine visits were made to other existing installations and minor infringements dealt with immediately.

HOUSING ACTS

The following shows the action taken during the year as regards unfit houses:-

Action	Number of Houses	
Number of houses demolished as a result of formal action		
Number of houses demolished by owners voluntarily	9	
Number of houses closed as a result of formal action	3	
Number of houses rendered fit as a result of formal action	1	
Number of houses rendered fit as a result of informal action	18	

In July, 1955, a report was prepared showing the estimated number of unfit dwellings in the District, to be the subject of a programme of clearance extending over the five years beginning in January, 1956, and ending in December, 1960.

This report showed the position as follows:-

- (1) Total number of permanent houses in the District .. 6,231
- (2) Estimated number of unfit houses suitable for action under Section 11 of the Housing Act, 1936, and for action in the above five year period.

.. 211

In March, 1960, a further report was submitted showing progress as follows:-

Number of nouses in programme	211
Number of houses demolished - formally - 40) - informally - 13)	53
Orders in force - demolition orders - 17) closing orders - 8) undertakings - 21)	46
Repaired - formally - 13) - 11)	81
Balance outstanding	31

The reference above to "combined" means that two or more cottages were converted into one, being fully repaired and modernised at the same time, and the number of dwellings is the number lost in the conversion, i.e., one where two were converted to one or two where three were converted into one.

Since the above mentioned date the balance of 31 has been reduced to 21 as follows:--

```
Demolished informally ... 2
Demolition orders in force ... 2
Closing orders in force ... 2
Repaired formally ... 1
Repaired informally ... 3
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The outstanding 21 properties consist of 10 occupied, 8 derelict and 3 vacant.

In addition to the above properties included in the clearance programme, over the period other properties deteriorated and received attention so that the actual position as at the 31st December, 1963, was as follows:-

93
35
22
4
96
6
9
5
3

Total:- 340

Proposals were in hand in respect of 8 of the properties subject to orders and/or undertakings.

RENT ACT, 1957.

There were no applications for certificates of disrepair received under the provisions of the above Act.

IMPROVEMENT GRANTS FOR HOUSING

The House Purchase and Housing Act, 1959, came into force on the 14th June, 1959, and introduced a new system of "standard" grants. to supplement the their existing scheme of "discretionary" grants, at the same time making a number of changes in the latter.

The new grants became available only towards the cost of installing "standard" amenities, i.e., bath, water closet, wash hand basin, food store and hot water supply, in dwellings which lacked any of these amenities but differing from "discretionary" grants in that, subject to certain conditions, they are claimable as of right. The amount of grant is one-half of the cost actually incurred on the works subject to a maximum grant of £155, scaled according to the amenities lacking and provided.

The main changes in the "discretionary" grant system are in the conditions, the conditional period having been reduced from 20 years to 10 years and the letting requirement being relaxed so that a property can be sold after three years from the completion of improvements to another owner-occupier without refund of grant.

DISCRETIONARY GRANTS

The "discretionary" grant scheme after a slow start got well under way in 1954 and applications over the years came in steadily as shown in the following table which shows, per year, the number of dwellings concerned in such applications, the total cost of the improvement works and the amount of grant made.

	AND STREET, STATE OF STATE	The first of the second section of the second secon	one of the expression of the entire expression of the feet for the contraction of the con			
Year	Number of applications received	Number of houses concerned in such applications			Total amount of grant approved	
1950	1		£879.	13.	6.	£439
1951	1	1	£578.		6.	
1952	NIL	NIL	CND			
1953	4	5	£2,484.	3.	0.	£1,241
1954	22	36	£14,932.		8.	£7,291
1955	38	58	£30,289.	5.	1.	£14,125
1956	19	31	£18,061.	4.	2.	£8,395
1957	21	36	£22,641.	8.	10.	£10,878
1958	33	47	£30,456.	9.	8.	£14,012
1959	38	52	£45,112.	7.	4.	£17,010
1960	28	35	£22,081.	19.	3.	£9,243
1961	25	29	£32,946.	0.	0.	£9,863
1962	24	33	£26,199.	3.	5.	£11,341
1963	18	22	£18,420.	5.	9.	£6,783
Totals	272	Christian allamatur alumniqui esterricipus (medieni libericipus chi esterricipus chi esterricipus (medieni libericipus chi esterricipus chi e	£265,082.	19.	2.	£110,910

The discretionary grant scheme which requires a comprehensive standard of fitness and amenities upon completion of the works allows of a 50% grant towards the cost of improvements subject to a maximum grant of £400.

The following table shows per year per dwelling the average cost of improvements and the average amount of grant made:-

Year	Number of Houses	Average cost of improve -ments	Average amount of grant
1950	2	£439	£219
1951	1	£578	£289
1952	-	0000	_
1953	5	£497	£248
1954	36	£415	£203
1955	58	£522	£244
1956	31	£583	£271
1957	36	£629	£302
1958	47	£648	£298
1959	52	£868	£327
1960	35	£631	£264
1961	29	£1,136	£340
1962	33	£797	£344
1963	22	£837	£308
Overall Average	387	£685	£287

These figures are affected in several ways, i.e., by the comparative higher cost of the conversion of buildings into dwellings; the increase in sewerage facilities allowing of cheaper drainage costs; and the rising costs of building materials and labour.

The following table shows year by year the localities in which houses were improved with the aid of discretionary grants. This table refers only to completed schemes.

Parish	Number of houses improved per year						Totals							
	19 51	19 52	19 53	19 54	19 55	19 56	19 57	19 58	19 59	19 60	19 61	19 62		A de Companyor de
Bentley		-	1	1	7	6	2	3	5	-	2		4	28
Bentworth		_	_	Cab	3	2	971.5		5	1		1	1	13
Binsted	-			-	Ø*100	3	L	5	7	6	2	Ù,	2	33
Chawton	-			-	2	413	125		979	20	1			3
East Tisted		-			5	4	2	1	6.3	1	3		5	21
Farringdon	-	-	-	-	2		-		3		-		6	11
Four Marks	-	anco	_	-	1	-	_		1	2		6 23	1	5
Froyle	-		-		L j.	11	4	8	1	1	2	-	1	32
Grayshott	-	-	-	-	4	3	6279	*	4	12	3	2	4	33
Headley	-		-	607	4	1	3	4	5	3	6	1	_	27
Kingsley	2	-	_			1	1	1	tn. a	1			1	7
Lasham	-	_	-	etra	679		_		are	7	1		1	9
Medstead	-	-	-	-	1		2	e-3	1	2	2	3	**	11
Newton Valence	-		-		3	3	2	क्रमध			Com	_	1	9
Ropl ey	_	-	-	-	3	2	4 44	1	2,	3	2	3	1	19
Selborne	_	1	-		2	2	3	4	3	12	8	3		38
Shalden	-	-			1	w.>	-	0-0-	_				1	2
West Tisted	_		-	1	000,00 000,00	94.0		63. 15*		_	-	_	1	2
Whitehill			-	1	6	2	9	4	1	4	5	1	6	39
Wield	-	-	_	er 100	2.	97.0	.A 6	9/7	-=	and the same of th	0-20			3
Worldham	-	-	0.0		9	6	5	LA B		ere	CONTROL OF THE PARTY OF THE PAR	-	2	23
TOTALS	2	1	1	3	59	46	38	33	40	55	36	19	35	368

The following table shows also year by year the occupancies of the dwellings for which discretionary grants were approved.

		4	
Year	Owner/Occupiers	Farm and/or Estate Occupancies	Tenanted
1950	-	2	-
1951	1	ec:s	-
1952	-	W20	
1953	1	4	
1954	7	27	2.
1955	12	41	5
1956	6	24	1
1957	6	30	
1958	14	29	4
1959	18	30	4
1960	12	13	10
1961	14	13	2
1962	13	12	8
1963	9	10	3
Totals	113	235	39

GRAND TOTAL: - 387

STANDARD GRANTS

The response of the public to this new system of grants was more immediate and has continued.

The following tables give various statistics:-

Year	Schemes approved	Maximum Grant	Completions	Grant approved
1959	36	£5,225	6	£675
1960	92	£12,870	51	£6,124
1961	60	£8,740	76	£9,685
1962	58	£8,285	52	£6,418
1963	37	£5,400	51	£6,804
TOTALS:	283	£40,520	236	£29,706

STANDARD GRANTS (Continued)

The localities in which houses were improved with the aid of "standard" grants, completed schemes, are as follows:-

Parish	Number	r year	Totals			
	1959	1960	1961	1962	1963	
Bentley	_	4	5	2 .	1	12
Bentworth	CHAID	1	4	1	1	7
Binsted	DIED	8	4	4	12	28
Chawton	-	frac	î	-	6=0	1
East Tisted	_	oso	đ.	==0	2	3
Farringdon	1	3	3	3	1	11
Four Marks	1	8	7	7	1	24
Froyle	_	a rs	-	1	-	1
Grayshott	2	5	15	2	5	29
Headley	2	4	7	6	2	21
Kingsley	=	1	LNJ	4	=->	5
Lasham	40WP	(sel)	gr.s	1	2	3
Medstead	Casto	3	6	5	4	18
Newton Valence	-	רוויט	2	cwh	-	2
Ropley	8123	5	•	2	1	9
Selborne	1909	2	5	3	2	12
Shalden	-	CH19	tirps	g/10)	1	1
West Tisted	-		1	1	040	2.
Whitehill	-	6	10	10	14	40
Wield	cra	ESC.J	2	4-1	2	ĴĮ
Worldham	CAD	1	2.		-	3
TOTALS:	6	51	76	52	51	236

STANDARD GRANTS (Continued)

The following table shows year by year the occupancies of the dwellings for which standard grants were approved:-

Year	Owner/occupiers	Farm and/or Estate Occupancies	Tenanted
1959	30	15	2
1960	57	10	25
1961	36	11	13
1962	37	6	15
1963	28	3	6
TOTALS	188	34	61

TOTAL: - 283

As the Improvement Grant schemes require the carrying out of any incidental repairs it follows that 368 + 236 = 604 houses have been thoroughly repaired as well as improved, thus obviating any possible action under the repair sections of the Housing Acts.

FACTORIES

Under the provisions of the Factories Acts, the District Council is the authority responsible for enforcing the provisions regarding sanitary accommodation in all factories and in all factories where mechanical power is not used, the provisions with respect to cleanliness, overcrowding, workroom temperature and ventilation, and floor drainage.

The following particulars are those prescribed on the administration of the Acts:-

PART I

(1) - INSPECTIONS for purposes of provisions as to health.

			N	umber of	
	(1) Premises	(2) Number on Register	(3) Inspections	(4) Written Notices	
(i)	Factories in which Sections 1,2,3,4 & 6 are to be enforced by Local Authorities (Non-power)	-]	1	NIL	NIL
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local Authority (Power)	66	40	2	NIL
(iii)	Other premises in which Section 7 is enforced by the Local Authority (excluding out-worker' premises)	132	31	10	NIL

(2) - Cases in which DEFECTS were found

Particulars	Numbe	er of cas wer	Number of cases in which prosecutions			
	Found	Remedied	Refe	rred	were instituted	
(1)	(2)	(3)	To H.M. Inspector (山)	By H.M. Inspector (5)	(6)	
Want of cleanliness (S. 1)	NIL	NIL	NIL	NIL	NIL	
Overcrowding (S.2)	NIL	NIL	NIL	NIL	NIL	
Unreasonable temperature (S. 3)	NIL	NIL	NIL	NIL	NIL	
Inadequate ventilation (S.4)	NIL	NIL	NII,	NIL	NIL	
Ineffective drainage of floors (S.6)	NIL	NIL	NIL	NIL	NIL	
Sanitary Conveniences(S.7) (a) Insufficient	11	11	NIL	1	NIL	
(b) Unsuitable or defective	1	1	NIL	NIL	NIL	
(c) Not separate for sexes	NIL	NIL	NIL	NIL	NIL	
Other offences against the Act (not including offences relat- ing to Outwork)	NIL	NIL	NIL	NIL	NIL	
TOTAL:-	12	12	NIL	1	NIL	

FACTORIES (Continued)

(3)

OUTWORK

(Sections 133 and 14)

Section 133			Section 134			
Number of out-workers in August list required by Section 133(1)(c)	Number of cases of default in sending lists to the Council	Number of presecutions for failure to supply lists	Number of instances of work in unwhole-some premises	Notices served	Prosec- utions	
NIL	NIL	NIL	NII:	NIL	NIL	

Of the above registered factories, these mainly consist of garages (motor vehicle repairs) and builders' yards (joinery).

There is one factory engaged on fibre glass fabrications, three light engineering factories, one blouse factory, one laundry and one brickworks.

There is only one factory, the fibre glass works, employing over 20 persons.

I am indebted to the Council's Engineer and Surveyor, Mr. John Blackwell, M. I. Mun. E., M. R. S. H., Chartered Municipal Engineer, for the following statistics relating to Building Byelaws and Planning, local authority housing, sewerage and public cleansing.

BUILDING BYELAWS AND PLANNING

The total number of plans deposited with the Council for building works and development was as follows:-

(1) Under Building Byelaw 502

(2) Planning applications only,
i.e., outline applications,
moveable dwellings, electricity lines etc.

Total number of plans deposited 946

The number of new private dwellings completed by private enterprise building during the year was 167.

The number of temporary building licences in force remained at 15. These buildings are all regularly inspected with a view to maintenance in a good state of repair.

LOCAL AUTHORITY HOUSING

The number of new Council houses completed during the year was 64 and the Council Housing position at the end of the year was as follows:-

> Permanent pre-war dwellings 78@ Permanent post-war dwellings 850 Temporary post-war dwellings 116@@

> > Total: 1.044

@ This figure includes 16 houses at Headley purchased NOTES: by the Council from the Headley Public Utility Society.

> @@ This figure is comprised of 50 pre-fabricated bungalows at Lindford (Whitehill Parish) and 66 hutted dwellings at Erie Estate (Headley Parish)

SEWERAGE

The Council's works at Lindford (Whitehill Parish) receive and treat sewage from Bordon, Whitehill, Lindford, Bordon Military Camp, Headley, Grayshott and part of an adjoining area of the Haslemere Urban District Council.

The total flow at the works during the year was 136,180,000 gallons, an average of 373,000 gallons per day.

-000000-

The amount of rainfall recorded at the works for the year was 31.23 inches, an average of 2.60 inches per month.

PUBLIC CLEANSING

All public cleansing work is carried out by the Council's own vehicles and staff.

Refuse Collection

A general scheme of full refuse collection operates throughout the District.

Up to the early part of December, collections were weekly in the Parishes of Whitehill and Grayshott and fortnightly elsewhere.

Schedules were revised as from this date and collections in the various parishes are now as follows:-

Selborne Weekly:-Bentley Grayshott Whitehill Headley Binsted Four Marks Wield Medstead Froyle

Fortnightly:-

Shalden Bentworth Kingsley West Tisted Chawton Lasham Newton Valence Worldham East Tisted Farringdon

Ropley

In addition, a weekly collection is made from the married quarters in the Bordon and Longmoor Military Camps together with the regular removal of refuse from unit incinerators.

The collecting vehicles covered a total of 46,200 miles during the year, an average of 3,850 miles per month and collected a total of 33,955 cubic yards of refuse, an average of 2,830 cubic yards per month.

Disposal of refuse is by means of controlled tipping at various tips throughout the District. The main tip is on the Council's own land of Faddley.

Cesspool Emptying

The Council operate a cesspool emptying service upon request for which a charge is made.

The number of loads (approximately 750 gallons per load) removed was as follows:-

- (1) From private properties 2,145 loads
- (2) From Council house systems 1,056 loads

Total:- 3,201 loads

The mileage covered by the cesspool emptying vehicles totalled 25,355 for the year, an average of 2,113 miles per month.

Nightsoil Collection

Collections of nightseil are made generally throughout the district in areas where sewers are not available.

The collecting vehicles covered a total of 12,045 miles, an average of 1,004 miles per month.

Public Conveniences

The Council maintain public conveniences at Bordon and Grayshott.

Depots

The cleansing service vehicles operate from depots at the Council Offices in Alton and at the Sewage Works at Lindford.

